

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000026072

Entity Name: GROVE SQUARE, INC.

FILED
Apr 26, 2004
Secretary of State

Current Principal Place of Business:

280 E ATLANTIC AVE
DELRAY BEACH, FL 33444 US

New Principal Place of Business:

Current Mailing Address:

118 NE 16 ST
DELRAY BEACH, FL 33444 US

New Mailing Address:

FEI Number: 65-0590518

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALLAGHER, EDWARD
118 NE 16TH ST
DELRAY BEACH, FL 33444

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HEYDER, KENNETH
Address: 6510 SW 57 ST
City-St-Zip: DAVIE, FL 33314

Title: VP () Delete
Name: GALLAGHER, ED
Address: 118 NE 16 ST
City-St-Zip: DELRAY BEACH, FL 33444

Title: S () Delete
Name: CATES, DAVID
Address: 2329 SW 23RD CRANBROOK DR
City-St-Zip: BOYNTON BEACH, FL 33436

Title: T () Delete
Name: ANSEL, ERIC,
Address: 941 S. NORTHLAKE DR
City-St-Zip: HOLLYWOOD, FL 33019

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: CATES, DAVID
Address: 1006 S.E. KITCHING COVE LANE
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDWARD R. GALLAGHER

VP

04/26/2004

Electronic Signature of Signing Officer or Director

_____ Date