

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000034083

Entity Name: M.R.H. GROVES, INC.

**FILED**  
**Jan 12, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

18646 CLAY HILL RD.  
DADE CITY, FL 33525

**New Principal Place of Business:**

**Current Mailing Address:**

18646 CLAY HILL RD.  
DADE CITY, FL 33525

**New Mailing Address:**

FEI Number: 59-3310399

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HILL, RUTH R  
18646 CLAY HILL RD.  
DADE CITY, FL 33525 US

**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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: RABB, JOHN M  
Address: 18714 CLAY HILL RD.  
City-St-Zip: DADE CITY, FL 33525

Title: D  
Name: HILL, RUTH R  
Address: 18646 CLAY HILL RD.  
City-St-Zip: DADE CITY, FL 33525

I hereby 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 all other like empowered.

SIGNATURE: RUTH HILL

D

01/12/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date