

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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FLORIDA DEPARTMENT OF STATE
B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 JUN 23 PM 3:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # PA5000000023

1. Corporation Name

Town Grove II, Inc.

Principal Place of Business

Mailing Address

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21	<u>3840 N. Collins Ave</u>	26	<u>22191 Powerline Rd.</u>	4. FEI Number		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		<u>65-0606-823</u>		Not Applicable	
22	<u>3840</u>	27	<u>#5A</u>	5. Certificate of Status Desired		<input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
23	<u>Seaside, FL</u>	28	<u>Boca Raton, FL</u>	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
24	Zip <u>33351</u>	25	Country <u>U.S.A.</u>	29	Zip <u>33433</u>	30	Country <u>U.S.A.</u>

9. Name and Address of Current Registered Agent

Andrew Newman
22191 Powerline Rd. #5A
Boca Raton FL 33433

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Andrew Newman

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

6/16/97

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<u>President</u> <input type="checkbox"/> DELETE	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<u>Andrew Newman</u>	12 NAME	
STREET ADDRESS	<u>22191 Powerline Rd. #5A</u>	13 STREET ADDRESS	<u>300002221403--2</u>
CITY-ST-ZIP	<u>Boca Raton FL 33433</u>	14 CITY-ST-ZIP	<u>-06/24/97--01063--004</u>
TITLE	<input type="checkbox"/> DELETE	21 TITLE	<u>*****365.00 *****365.00</u>
NAME		22 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		23 STREET ADDRESS	<u>300002221403--2</u>
CITY-ST-ZIP		24 CITY-ST-ZIP	<u>-06/24/97--01063--005</u>
TITLE	<input type="checkbox"/> DELETE	31 TITLE	<u>*****8.75 *****8.75</u>
NAME		32 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	<u>06-23-97</u>
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Andrew Newman

Signature typed or printed name of signing officer or director

6/16/97

Sec-365-566(202)

Signature Date/Time/Phone #

CR2E034 (9/96)



"Our Speciality Is You"

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June 16th, 1997

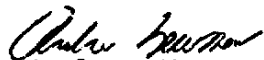
Division of Corporations:

It has come to my attention that our firm, TOWN GROVE II INC. has never received the applications for renewal from the Division of Corporations. The reason is that we moved our corporate headquarters, in the same shopping center, and the Division of Corporations had all of our applications returned as "address unknown."

Our new correct address is: 22191 Powerline Rd. #5A
Boca Raton, Fl. 33433

I was advised by the Div. of Corp. that I can have TOWN GROVE II, INC. reinstated for a total fee of \$365.00 which amount is enclosed. Thanks for your assistance.

Sincerely,


Andrew Newman
President
TOWN GROVE II, INC.