

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000093431

FILED
Apr 27, 2010
Secretary of State

Entity Name: GROVE NURSERIES, INC.

Current Principal Place of Business:

5235 PRINCETON WAY
BOCA RATON, FL 33496 US

New Principal Place of Business:

3930 MAX PLACE
BOYNTON BEACH, FL 33436 US

Current Mailing Address:

5235 PRINCETON WAY
BOCA RATON, FL 33496 US

New Mailing Address:

3930 MAX PLACE
BOYNTON BEACH, FL 33436 US

FEI Number: 65-0626781

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PUDER, MICHAEL S
5235 PRINCETON WAY
BOCA RATON, FL 33496 US

Name and Address of New Registered Agent:

PUDER, MICHAEL S
3930 MAX PLACE
BOYNTON BEACH, FL 33436 US

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:

04/27/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD
Name: PUDER, MICHAEL S
Address: 3930 MAX PLACE
City-St-Zip: BOYNTON BEACH, FL 33436

Title: VP
Name: HILL, KIMBERLY
Address: 3930 MAX PLACE
City-St-Zip: BOYNTON BEACH, FL 33436

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: MICHAEL PUDER

P

04/27/2010

Electronic Signature of Signing Officer or Director

Date