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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P9600003063 (0)

PALMETTO GROVE GRILL, INC.

2. Principal Place of Business

Suite, Apt. #, etc.

21

Principal Place of Business Mailing Address

241 KINGSTON DR.

FT. MYERS FL 33905

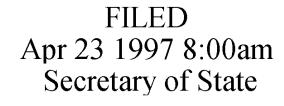
Principal Place of Business Mailing Address

241 KINGSTON DR.

FT. MYERS FL 33905-2517

2a. Mailing Address

Suite, Apt #, etc.





3a. Date of Last Report

Applied For

Not Applicable \$8.75 Additional

3. Date Incorporated or Qualified

5. Certificate of Status Desired

01/10/1996

22		27				1	1 66 1161	quireu	
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution	_ +		
Zip	Country Zip			Country		8. This corporation has liability for inta	ngible tax under s.	199.032,	
24	25 29 30				Florida Statutes 🙀 Yes 🗌 No				
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
DAVIS, GEOFFREY S					Name)	
241 KINGSTON DR.				82 Street Address (P.O. Box Number is Not Acceptable)					
FT. MYERS FL 33905			[-						
				83					
				84	City		85 Zip C	2000	
•				64	City		FL 85 Zip C	,00 0	
office or re agent√l a	to the provisions of Sections 607.050; egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such cha	inge was author	prized by	the corpo	orporation submits this statement for the purp ration's board of directors. I hereby accept th	ose of changing its le appointment as r	registered registered	
SIGNATURE	Signature, typod or printed name of registered age	of and the if applicable	(NOTE: Re-	jistered Ago	ent signature re	quired when reinstating)	DATE		
12.	OFFICERS AND	DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICER	S AND DIRECTOR	S IN 12	
TITLE	D			1.1 TITLE			Change	Addition	
NAME	DAVIS, GEOFFREY S			1.2 NAME				1	
STREET ADDRESS	241 KINGSTON DR.			1.3 STREET ADDRESS				Ji	
CITY-ST-ZIP	FT. MYERS FL 33905			1.4 CITY-S	T - 716'				
TITLE	Ъ		DELETE	2.1 TITLE			Change	☐ Addition	
NAME	DAVIS, VICTORIA L			2.2 NAME				i i	
STREET ADDRESS	241 KINGSTON DR.			2.3 STREET	ADDRESS			1	
CITY-ST-ZIP	FT. MYERS FL 33905			2. 4 CITY - S	51-21P				
TITLE			DELETE	31 TITLE			Change	Addition	
NAME			ľ	32 NAME	[ſ	
STREET ADDRESS				3.3 STREFT	ADDRESS				
CITY-ST-ZIP			j	3.4 CHY-5	61 - ZIP			,	
TITLE			DELETE	4.1 TITLE			Change	☐ Addition	
NAME				4. 2 NAME					
STREET ADDRESS				4 3 STREET	ADDRESS				
CITY-ST-ZIP				4.4 CITY-S	T-7@			ľ	
TITLE			DELETE	5.1 TITLE			Change	Addition	
NAME			l	5.2 NAME					
STREET ADDRESS			I	5.3 STREET	ADDRESS			1	
CITY-ST-ZIP				5.4 CITY - S	1 - Z(P				
TITLE		DELETE 6					Change	Addition	
NAME				6.2 NAME					
STREET ADDRESS				6.3 STREET	ADDRESS				
CITY-ST-ZIP				6.4 CITY-S	T-2)P				
Intormatio	n indicated on this annual report or s fficer or director of the corporation or	upplemental annual the receiver or trust	report is true : ee empowere:	and accu d to exec	irate and th	ted in Section 119.07(3)(i), Florida Statutes. I nat my signature shall have the same legal el port as required by Chapter 607, Florida Stat	flect as if made und	der oath. that l	
appears in Block 12 or Block 13 if changed, or on an attachment with an address.									