

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P96000027451

Entity Name: CEE BEE'S GROVE, INC.

FILED
Sep 22, 2006
Secretary of State

Current Principal Place of Business:

16900 BOY SCOUT ROAD
ODESSA, FL 33556 US

New Principal Place of Business:

Current Mailing Address:

16900 BOY SCOUT ROAD
ODESSA, FL 33556 US

New Mailing Address:

FEI Number: 59-3370647

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIBSON, JAMES W
445 COUNTRY CLUB RD
BELLEAIR, FL 33756 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: DP () Delete
Name: BURCHENAL, WILLIAM J
Address: 1058 ELDORADO AVE
City-St-Zip: CLEARWATER, FL

Title: DV () Delete
Name: BURCHENAL, ANN KENNEDY
Address: 1058 ELDORADO AVE
City-St-Zip: CLEARWATER, FL

Title: DST () Delete
Name: SIBSON, JAMES W
Address: 445 COUNTRY CLUB ROAD
City-St-Zip: BELLEAIR, FL

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: BURCHENAL, ANDREW F
Address: 16900 BOY SCOUT ROAD
City-St-Zip: ODESSA, FL 33556 US

Title: DST (X) Change () Addition
Name: SIBSON, JAMES W
Address: 16900 BOY SCOUT ROAD
City-St-Zip: ODESSA, FL 33556 US

Title: DVP (X) Change () Addition
Name: SHOCKLEY, ANN B
Address: 16900 BOY SCOUT ROAD
City-St-Zip: ODESSA, FL 33556 US

Title: D () Change (X) Addition
Name: BURCHENAL JR., WILLIAM
Address: 16900 BOY SCOUT ROAD
City-St-Zip: ODESSA, FL 33556 US

Title: DVP () Change (X) Addition
Name: BURCHENAL, WILLIAM K
Address: 16900 BOY SCOUT ROAD
City-St-Zip: ODESSA, FL 33556 US

Title: DVP () Change (X) Addition
Name: SIBSON, MARY J
Address: 16900 BOY SCOUT ROAD
City-St-Zip: ODESSA, FL 33556 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ANDREW F. BURCHENAL

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09/22/2006

Electronic Signature of Signing Officer or Director

Date