2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2005
Secretary of State

DOCUMENT# P96000060374

Entity Name: NORRIS GROVES, INC.

Current Principal Place of Business:

3263 NE HWY 17
#3
ARCADIA, FL 34266

New Principal Place of Business:

3263 NE HWY 17
#3
ARCADIA, FL 34266 US

Current Mailing Address:

PO BOX 2073
ARCADIA, FL 34265

New Mailing Address:

PO BOX 2073
ARCADIA, FL 34265 US

FEI Number: 59-3407661 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NORRIS, BENJAMIN K
3263 NE HWY 17
P.O. BOX 2073
ARCADIA, FL 34265 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: NORRIS, BENJAMIN K
Address: PO BOX 2073
City-St-Zip: ARCADIA, FL 34265

Title: VPS ( ) Delete
Name: NORRIS, DUANE P
Address: 1507 N. ARCADIA AVE
City-St-Zip: ARCADIA, FL 34266

Title: T ( ) Delete
Name: NORRIS, ROBERT R
Address: PO BOX 2073
City-St-Zip: ARCADIA, FL 34265

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BENJAMIN K. NORRIS P 02/16/2005

Electronic Signature of Signing Officer or Director — Date