

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000066248

Entity Name: THE GROVE GOURMET, INC.

FILED
Apr 16, 2008
Secretary of State

Current Principal Place of Business:

150 NORTH GRAVES ROAD
FT. PIERCE, FL 34945

New Principal Place of Business:

Current Mailing Address:

979 BEACHLAND BLVD.
VERO BEACH, FL 32963

New Mailing Address:

PO BOX 2667
FT PIERCE, FL 34954

FEI Number: 59-3394428

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRUBB, LORI
150 NORTH GRAVES
FORT PIERCE, FL 34945 US

Name and Address of New Registered Agent:

GRUBB, LORI
9205 CR 635
SEBRING, FL 33875 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: LORI S. GRUBB

04/16/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: OD () Delete
Name: GRUBB, LORI S
Address: 150 NORTH GRAVES ROAD
City-St-Zip: FORT PIERCE, FL 34945

Title: OD () Delete
Name: SCHIRARD, J. BRANTLEY
Address: 150 NORTH GRAVES ROAD
City-St-Zip: FORT PIERCE, FL 34945

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: LORI S. GRUBB

PRES

04/16/2008

Electronic Signature of Signing Officer or Director

Date