

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 05, 2004 8:00 am
Secretary of State

04-05-2004 90062 030 ***150.00

DOCUMENT # P98000018146

1. Entity Name

CONWAY GROVES, INC.



Principal Place of Business

CITRUS BANK BLDG
12200 WEST COLONIAL DRIVE SUITE 3001
WINTER GARDEN FL 34787

Mailing Address

CITRUS BANK BLDG
12200 WEST COLONIAL DRIVE SUITE 3001
WINTER GARDEN FL 34787

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

P O Box 699

Suite, Apt. #, etc.

City & State

City & State
Apopka, FL

Zip

Country

Zip

Country

32704-0699

USA



MOORE

CR2E034 (11/03)

4. FEI Number

59-3500314

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MCCALL, RANDALL E
CITRUS BANK BLDG
12200 WEST COLONIAL DRIVE, SUITE 3001
WINTER GARDEN FL 34787

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

105 E ROBINSON STREET

Suite 540

City

Orlando

FL

Zip Code

32801

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent Signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DP ☐ Delete
NAME MCCALL, RONALD W
STREET ADDRESS 12200 WEST COLONIAL DRIVE STE 3001
CITY-ST-ZIP WINTER GARDEN FL 34787

TITLE DVP ☐ Delete
NAME MCCALL, HOLLY J
STREET ADDRESS 12200 WEST COLONIAL DRIVE STE 3001
CITY-ST-ZIP WINTER GARDEN FL 34787

TITLE DST ☐ Delete
NAME MCCALL, RANDALL E
STREET ADDRESS 12200 WEST COLONIAL DRIVE STE 3001
CITY-ST-ZIP WINTER GARDEN FL 34787

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME P O Box 699
STREET ADDRESS Apopka, FL 32704-0699

TITLE ☒ Change ☐ Addition
NAME P O Box 699
STREET ADDRESS Apopka, FL 32704-0699

TITLE ☒ Change ☐ Addition
NAME P O Box 699
STREET ADDRESS Apopka, FL 32704-0699

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Donald W. McCall

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/24/04

Date

407-880-9029

Daytime Phone #