2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2007
Secretary of State

DOCUMENT# S02469

Entity Name: GULFSTREAM GROVES, INC.

Current Principal Place of Business:

PO BOX 3152
FT PIERCE, FL 34948

New Principal Place of Business:

14800 WEST INDRIO RD
FT PIERCE, FL 34945

Current Mailing Address:

PO BOX 3152
FT PIERCE, FL 34948

New Mailing Address:

FEI Number: 65-0243627 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STRAZZULLA, JOSEPH P
14800 WESR INDRIO ROAD
FT PIERCE, FL 34954 US

Name and Address of New Registered Agent:

STRAZZULLA, JOSEPH P
14800 WEST INDRIO RD
FT PIERCE, FL 34945 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: _____ 04/09/2007
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: STRAZZULLA, JOSEPH P,
Address: 2076 CAVALLA
City-St-Zip: VERO BEACH, FL

Title: STD ( ) Delete
Name: STRAZZULLA, PHILLIP, P
Address: 4102 SABAL PALM DRIVE
City-St-Zip: VERO BEACH, FL

Title: VD ( ) Delete
Name: STRAZZULLA, JOHN F,
Address: 4715 PEBBLE BAY CIR
City-St-Zip: VERO BEACH, FL

Title: VD ( ) Delete
Name: STRAZZULLA, FRANK J,
Address: 4504 REDWOOD DRIVE
City-St-Zip: FT. PIERCE, FL

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:

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 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: JOSEPH P STRAZZULLA PRES 04/09/2007
Electronic Signature of Signing Officer or Director — Date