FILE NOW: FILING FEE AFTER MAY 1ST IS:\$550.00 **PROFIT** FLORIDA DEPARTMENT OF STATE Mar 11, 1999 8:00 am CORPORATION Katherine Harris ANNUAL REPORT **Secretary of State** Secretary of State DIVISION OF CORPORATIONS 1999 03-11-1999 90094 023 ***150.00 DOCUMENT # 535009 GRASSMERE GROVES INC. GRASS MERE GROVES, INC 360 GOLF BROOK CIR#10Y LONGWOOD, FL 32779 Principal Place of Business DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 360 GOLF BROOK CIR 65-024830 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired П APT. Fee Required City & State City & State. \$5:00 May Be 6. Election Campaign Financing LONGWOOD Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation owes the current year Intangible 32779 SEMINOLE Personal Property Tax. ☐ Yes □No 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent WEBMAN JEFFREY Street Address (P.O. Box Number is Not Acceptable)
360 GOLF BROOK CIR 83 City LONGWOOD Zip Code 32779 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. JEFFREY SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ DELETE ☐ Change PRESIDENT 11 TITLE JEFFREY WEBIMAN 360 GOLF BREOK CIR 104 1.2 NAME 1.3 STREET ADDRESS STREET ADDRESS LONGWOOD, FL VICE PRESIDENT 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change ☐ Addition 2.1 TITLE 22 NAME MALKA WEBMAN STREET ADDRESS 1508 ARTHUR AVE 2.3 STREET ADDRESS OKLANDO , FL 2. 4 CITY-ST-ZIP CITY-ST-ZIF SECRETARY / TREASCIPER DELETE ☐ Change— -- ☐ Addition 3.1-TITLE -HAROLD WERMAN 3.2 NAME 720 CORAL WAY 413E STREET ADDRESS 3.3 STREET ADDRESS CORAL GABLES, FL 33134 CITY-ST-ZIP 3.4. CITY-ST-ZIP ☐ Addition 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIF CITY-ST-ZIP ☐ DELETE ☐ Change ☐ Addition 51 TITLE 52 NAME 5.3 STREET ADDRESS STREET ADDRESS

14. 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 annual report or supplemental annual 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

5.4 CITY-ST-ZIE

6.4 CITY-ST-ZIP

6.1 TITLE

62 NAME 6.3 STREET ADDRESS

□ DELETE

21

22

23

24

12

TITLE

NAME

TITLE

NAME

TITLE NAME

TITLE

NAME

TITLE

NAME

TITLE NAME

CITY-ST-ZIP

STREET ADDRESS

☐ Change

☐ Addition

CR2E034 (11/98)