

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S96573

FILED  
Jan 15, 2010  
Secretary of State

Entity Name: LANGFORD GROVES, INC.

**Current Principal Place of Business:**

% JAMES H. LANGFORD  
2433 BREWER AVE SW  
ARCADIA, FL 34266

**New Principal Place of Business:**

**Current Mailing Address:**

JAMES H. LANGFORD  
11506 GROVE LANE  
SEFFNER, FL 33584

**New Mailing Address:**

FEI Number: 65-0304633

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LANGFORD, JAMES H.  
11506 GROVE LANE  
SEFFNER, FL 33584 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: PD  
Name: LANGFORD, JAMES H  
Address: 2433 BREWER AVE SW  
City-St-Zip: ARCADIA, FL 34266

Title: S  
Name: BOUCHER, FAYE  
Address: 526 YUKON DRIVE  
City-St-Zip: PT. CHARLOTTE, FL 33948

Title: V  
Name: LANDFORD, DONALD  
Address: 2433 BREWER AVENUE SW  
City-St-Zip: ARCADIA, FL 34266

Title: T  
Name: MORTON, MICHELLE  
Address: 2460 QUAIL TERRACE  
City-St-Zip: PT. CHARLOTTE, FL 33981

I hereby 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 all other like empowered.

SIGNATURE: JAMES H LANGFORD

PD

01/15/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date