2005 FOR PROFIT CORPORATION

FILED **ANNUAL REPORT** Mar 03, 2005 08:00 AM DOCUMENT # V02717 **Secretary of State** 1. Entity Name FLETCHER GROVES, INC. Mailing Address Principal Place of Business 10 VAGABOND LANE 10 VAGABOND LANE WINTER HAVEN, FL 33881 WINTER HAVEN, FL 33881 CR2E034 (10/03) 02052005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3102471 Not Applicable **\$8.75** Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent DO NOT WRITE OLSON, JOHN E. 10 VAGABOND LANE WINTER HAVEN, FL 33881 IN THIS SPACE 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) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE FLETCHER, CLARK R. JR. NAME 6004 RINCONCITO WAY STREET ADDRESS CITY-ST-ZIP EL PASO, TX TITLE U00000251139 OLSON, JOHN E NAME 03/04/05-80040-005 150.00 10 VAGABOND STREET ADDRESS WINTER HAVEN FL 33881 CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NALEE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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 AND TYPED OR PRINTED NAME OF Clark R. Fletcher, Jr. President

NAME STREET ADDRESS CITY-ST-ZIP

915-585-1814