FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

APPROVED AND FILED

95 MAY -1 PM 9:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1995

DOCUMENT # V23187 (0)

1. THE GROVES OF NAPLES, INC.

7900 AIRPORT ROAD
NAPLES FL 33942
US

7900 AIRPORT ROAD
NAPLES FL 33942
US

3. 03/18/1992

3a. Date of Last Report: 06/28/1994

4. FEI Number: 65-0373429 — Applied For / Not Applicable

5. Certificate of Status Desired: $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: $5.00 May Be Added to Fees

8. Yes / No

9. Name and Address of Current Registered Agent

WALLACE, JAMES
7900 AIRPORT RD NO
NAPLES FL 33963-2838

10. Name and Address of New Registered Agent

81 Name

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

83

84 City FL 85 Zip Code

11. Pursuant to the provisions of Section [illegible], 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. The corporation is authorized to do business in Florida and its registered office and registered agent will be identical to those set forth in this statement. If the registered agent is changed, the new registered agent has agreed to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

SIGNATURE

12. OFFICER/DIRECTOR(S)		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	TITLE	☐ Change ☐ Addition
NAME	WALLACE, JAMES	NAME	
STREET ADDRESS	2860 CITRUS LAKE DR.	STREET ADDRESS	
CITY-STATE-ZIP	NAPLES FL	CITY-STATE-ZIP	
TITLE	VD	TITLE	☐ Change ☐ Addition
NAME	WALLACE, DEBRA	NAME	
STREET ADDRESS	2860 CITRUS LAKE DR.	STREET ADDRESS	
CITY-STATE-ZIP	NAPLES FL	CITY-STATE-ZIP	
TITLE	SD	TITLE	☐ Change ☐ Addition
NAME	WALLACE, JOSEPH	NAME	
STREET ADDRESS	1717 GULFSHORE BLVD, N., APT. 401	STREET ADDRESS	
CITY-STATE-ZIP	NAPLES FL	CITY-STATE-ZIP	
TITLE	TD	TITLE	☐ Change ☐ Addition
NAME	WALLACE, LILLIAN	NAME	
STREET ADDRESS	1717 GULFSHORE BLVD., N., APT. 401	STREET ADDRESS	
CITY-STATE-ZIP	NAPLES FL	CITY-STATE-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-STATE-ZIP		CITY-STATE-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-STATE-ZIP		CITY-STATE-ZIP	

14. For profit corporations only. Pursuant to the provisions of Section 607.0505, Florida Statutes, the above named corporation submits this statement for the purpose of designating a registered agent, upon whom process may be served, in Florida. The above named corporation is aware that it may pay the fees required by Chapter 607, Florida Statutes, and that its name appears above, or it has properly qualified to do business in Florida.

SIGNATURE: [signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/95

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