## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Moriham

Secretary of State

DIVISION OF CORPORATIONS

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DOCUMENT # V69092

(7)

, Corporation Name

CIRCLE K GROVES, INC.

Principal Place of Business

Mailing Address

33131 SERENE DRIVE PUNTA GORDA FL 33982 33131 SERENE DRIVE PUNTA GORDA FL 33982



3. Date incorporated or Qualified 3a. Date of Last Report

						10/02/1992	04/04/	1995		
2. Principal F	Place of Business	2a. Mailing Address		,		4. FEI Number	<u> </u>	Applied For		
21	26					65-0383585		Not Applicable		
	Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.7	5 Additional		
22	27					3. Certificate of Otatos Desired	□ Fee	Required		
City & Staf	te	City & State				6. Election Campaign Financing	\$5.	00 May Be		
23		28				Trust Fund Contribution	☐ Add	led to Fees		
	Country	Zip	Count	ry		8. This corporation has liability for in	ntangible tax under	s 199.032,		
24	25	29	30			Florida Statutes XX Yes				
Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent				
			8	1 Nam	0					
KAYS	i, ronald H.		8	82 Street Address (P.O. Box Number is Not Acceptable)						
33131 SERENE DRIVE			*	Street Address (1.0. Dox Harrison to Hot Mospharia)						
PUNT	PUNTA GORDA FL 33982			63						
			<u> </u>							
			8	4 City			FL  85  3	Zip Code		
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	s, the above	named	corporat	tion submits this statement for the purp	ose of changing its	registered office		
or registe familiar w	ered agent, or both, in the State of Florid vith, and accept the obligations of, Sect	ia. Such change was authorize on 607 0505. Florida Statutes	d by the co	poration	's board	of directors. I hereby accept the appo	intment as registere	ed agent. I am		
SIGNATURE	Signature, typied or printed name of registered agent	and tile if applicane (NOT)	E. Registered Ag	ant signatu	re required v	when reinstaling)	DATE			
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECT	ORS IN 12		
TILLE	PTD	☐ DELETE	1. 1 TITU	E			☐ Change	Addition		
NAME	KAYŞ, LORETTA B.		1.2 NAM	E						
STREET ADDRESS	33131 SERENE DRIVE		1.3 STRF	ET ADDRES	s					
COLY-ST ZIP	PUNTA GORDA FL		1.4 CITY							
10h F	SDD	DELETE	2 1 1110			· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition		
NAME	KAYS, RONALD H.	<u> </u>	2 2 NAM							
	33131 SERENE DRIVE									
STREET ADDRESS	PUNTA GORDA FL			ET ADDRES	°					
CITY ST-718	VD VD	DELETE	2.4 CITY				Change	Addition		
THEF	KAYS, MARK C.		3 1 TITU					- Augmon		
NAME	33131 SERENE DRIVE		3.2 NAMI							
STREET AFFORESS				ET ADDRE	SS					
City: St-Zit;	PUNTA GORDA FL		3.4 CITY							
THLE	VD VANO LODIE ANNI	DELETE	4. 1 TITL				☐ Change	Addition		
NAM:	KAYS, LORIE ANN		4.2 NAM	É						
STREET ADDRESS			4.3 STRE	ET ADDRES	s					
CITY - ST - ZIF	PUNTA GORDA FL		4.4 CITY	- ST - ZIP						
THLE		DEFELF	5 1 TITL	E			Change	Addition		
NAMe			5 2 NAM	£						
STREET ADDRESS			5.3 STRE	ET ADDRES	s					
CHTY - ST - ZIF			5.4 CITY	- ST - ZIP						
TIFLE		☐ DELETE	6. 1 TITL		1		Change	Addition		
NAME			6.2 NAM	E	1					
STREET ADDRESS				- ET ADDRES	s					
CHY-ST ZIP			6.4 CITY		-					
	by certify that the information supplied	with this filing is voluntarily furnic			ualify for	the exemption stated in Section 119.0	07(3)(k). Florida Sta	utes. I further		
oath; tha	by certify that the information supplied at the information indicated on this and tI am an officer or director of the corpor in Block 12 or Block 13 if changed, or or	ration or the receiver or trustee	empowered	true and d to exe	accurate cute this	and that my signature shall have the s report as required by Chapter 607, Flo	same legal effect as rida Statutes; and f	if made under that my name		