

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000149445

Entity Name: SFP GROVE MANAGEMENT, INC.**Current Principal Place of Business:**4855 CANOE CREEK RD
ST CLOUD, FL 34772**Current Mailing Address:**PO BOX 700128
SAINT CLOUD, FL 34770-0128 US**FEI Number:** 20-3752968**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SESSIONS, MARK C
4855 CANOE CREEK ROAD
SAINT CLOUD, FL 34772 US*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**Officer/Director Detail :**

Title	P
Name	SESSIONS, MARK C
Address	4855 CANOE CREEK ROAD
City-State-Zip:	SAINT CLOUD FL 34772

Title	T
Name	SESSIONS, EDWARD HAMPTON
Address	1507 SUNSET POINTE PL
City-State-Zip:	KISSIMMEE FL 34744

Title	S
Name	SILCOX, ANN S
Address	226 S COVE LANE
City-State-Zip:	PANAMA CITY FL 32401

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: MARK C SESSIONS

PRESIDENT

03/08/2022

Electronic Signature of Signing Officer/Director Detail_____
Date