

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000000826

**FILED  
Jan 20, 2020  
Secretary of State  
3395509654CC**

**Entity Name:** GROVES SWIMMING POOL SERVICE, INC.

**Current Principal Place of Business:**

3561 1ST AVE. NW  
NAPLES, FL 34120

**Current Mailing Address:**

3561 1ST AVE. NW  
NAPLES, FL 34120 US

**FEI Number: 65-0719787**

**Certificate of Status Desired: Yes**

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

GROVES, RONALD B  
950 N. COLLIER BLVD., STE. 208  
MARCO ISLAND, FL 34145 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 GROVES, R. BRYAN  
Address 3561 1ST AVE. NW  
City-State-Zip: NAPLES FL 34120

Title VP  
Name GROVES, MICHELLE M  
Address 3561 1ST AVE. NW  
City-State-Zip: NAPLES FL 34120

Title S  
Name GROVES, JILL M  
Address 950 N. COLLIER BLVD.,  
STE. 208  
City-State-Zip: MARCO ISLAND FL 34145

*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: R. BRYAN GROVES**

**PRESIDENT**

**01/20/2020**

Electronic Signature of Signing Officer/Director Detail

Date