

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000038838

Entity Name: JMC GROVES, LLC**Current Principal Place of Business:**14925 SW 232ND STREET
GOULDS, FL 33170**Current Mailing Address:**14925 SW 232ND STREET
GOULDS, FL 33170 US**FEI Number:** 20-1151277**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CASE, JANET M
14925 SW 232ND STREET
GOULDS, FL 33170 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**Authorized Person(s) Detail :**

Title	MGRM
Name	CASE, JANET M
Address	14925 SW 232ND STREET
City-State-Zip:	GOULDS FL 33170

Title	MEMB
Name	CASE, BRADLEY
Address	26503 SW 173 PLACE
City-State-Zip:	HOMESTEAD FL 33031

Title	MEMB
Name	CASE, GREGORY
Address	408 NW 19TH STREET
City-State-Zip:	HOMESTEAD FL 33030

Title	MEMB
Name	CHALKER, KIMBERLY
Address	14910 SW 228 STREET
City-State-Zip:	GOULDS FL 33170

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JANET CASE**MEMBER****04/15/2017**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date