

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L95000000873

Entity Name: CAMPBELL GROVES, LLC

Current Principal Place of Business:

650 NORTH ROCK ROAD
FORT PIERCE, FL 34945

Current Mailing Address:

PO BOX 2457
FORT PIERCE, FL 34954

FEI Number: 65-0639986

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FOWLER, MICHAEL D
2940 S 25TH STREET
FORT PIERCE, FL 34981 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 MGR
Name SCOTT, KENNETH T
Address P O BOX 2457
City-State-Zip: FORT PIERCE FL 34954

Title MGR
Name SCOTT, DAN C
Address P O BOX 2457
City-State-Zip: FORT PIERCE FL 34954

Title MGR
Name BROWN, EDGAR A
Address P O BOX 2457
City-State-Zip: FORT PIERCE FL 34954

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: KENNETH T SCOTT

MANAGING MEMBER

02/20/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date