

**State of Rhode Island
Department of State - Business Services Division**

Annual Report for the year: 2024
Corporation

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

FILED
MAR 19 2024
BY 3037
[Signature]

1. Entity ID Number 001743301		2. Exact name of the Corporation GROUNDHOG ENTERPRISES, INC.					
3. Principal Office Address 348 HIATT DRIVE, SUITE 205				City PALM BEACH GARDENS		State FL	Zip 33418
4. NAICS Code 522220		6. Brief description of the character of business conducted in Rhode Island CREDIT CARD PROCESSING					
5. State of Incorporation GA							
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>							
President Name JOHN P. KUCYK				Vice-President Name			
Street Address 3056 SE DUNE DR				Street Address			
City STUART	State FL	Zip 34996	City		State	Zip	
Secretary Name				Treasurer Name			
Street Address				Street Address			
City	State	Zip	City		State	Zip	
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>							
Director Name				Director Name			
Street Address				Street Address			
City	State	Zip	City		State	Zip	
Director Name				Director Name			
Street Address				Street Address			
City	State	Zip	City		State	Zip	
9. Shares Authorized			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>				
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		CLASS/SERIES		PAR VALUE
			500		COMMON		1
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.							
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.							
Name of Authorized Representative <i>[Signature]</i>						Date 3/10/2024	
Signature of Authorized Representative JAMES LEGATES							

MAIL TO:
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