2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 705252

1. Entity Name

GEORGIAN CEMETERY PERPETUAL MAINTENANCE FUND, IN

				UTV				
Principal Place of Business Mailing Address			Ĺ	7				
MERRITT ISLAND FL 32952		P.O. BOX 542524 MERRITT ISLAND FL 32952 US		880480A				
9 Principal P	Hope of Business	2 Mailing Address						
2. Principal Place of Business 3. I		3. Making Address	3. Mailing Address		aliib ilool b iil b ilol ala li alai	6 0 1 0 6		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		NOT WRITE IN THIS S	PACE		
City & State		City & State		4. FEI Number 59-1652324 Applied For Not Applicable				
Zip	Country	Zip	Country	5. Certificate of Status		\$8.75 Add	litional	
	6. Name and Address of Current	Registered Agent		-7. Name and Addres				
			Name -					
PINKERTON, JAMES B JR 225-8 SPRING DRIVE			Street Addres	Street Address (P.O. Box Number is Not Acceptable)				
MERRITT ISLAND FL 32953			City	FL Zip Code			e	
	FILE NOW: FEE IS \$61.25 ember 12, 2001, min. will be \$2		9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees Make Check Payable to Department of State			
10.	OFFICERS AND DII	RECTORS	11.	ADDITIONS/CHANGES	TO OFFICERS AND DIR	ECTORS IN	10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD PINKERTON, JAMES B JR 225-8 SPRING DR. MERRITT ISL FL 32953	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PATSKOSKI, ROBERT J 2885 S TROPICAL TRAIL MERRITT ISL FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ا در العامليات العالم	. "Stagen	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BAXLEY, STANLEY 1360 N. COURTENAY PKWY. MERRITT ISL FL	☐ Delete	TITLE NAME 'STREET ADDRESS CITY-ST-ZIP			Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. WEGERIF, EVERETT L. 3000 S. TROPICAL TRAIL MERRITT ISL FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KELLAR, NED 3950 OLD SETTLEMENT RD MERRITT ISL FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	·		☐ Change	Addition {	
TITLE , Name Street Address City-St-Zip	,	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition	

FILED Sep 06, 2001 8:00 am Secretary of State

09-06-2001 90272 023 ****61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE:

SIGNATURE:

SIGNATURE: