2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751755

FILED Jan 13, 2009 Secretary of State

Entity Name: CONNER CEMETERY ASSOCIATION, INC.

0400 804	4 OD 205		-	
C/O KEN	V CR 225 RYAN FL 32091			
Current Mailing Address:		New Mailing Addre	New Mailing Address:	
C/O KEN	V CR 225 RYAN FL 32091			
El Numbe	r: 59-2153973	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name an	d Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:
00 WES	, JOHN S T CALL STREE FL 32091 L			
	e named entity : te of Florida.	submits this statement for the p	ourpose of changing its registe	red office or registered agent, or both,
NONATI	IDE:			
SIGNAT C	'I \ ∟.			
SIGNATU		nic Signature of Registered Age	ent	Date
SIGNATU				Date GES TO OFFICERS AND DIRECTOR
	Electron S AND DIREC TD () RYAN, KENNE 12166 NW CR	TORS:) Delete IH C 225		
OFFICER itle: lame: .ddress:	Electron S AND DIREC TD () RYAN, KENNE 12166 NW CR STARKE, FL 3 D () HUTCHESON, 6 S.R. 230 EAST	TORS:) Delete TH C 225 2091	ADDITIONS/CHAN Title: Name: Address:	GES TO OFFICERS AND DIRECTOR
DFFICER ittle: ame: ddress: city-St-Zip: ittle: ame: ddress: city-St-Zip: ittle: lame: ddress:	Electron S AND DIREC TD () RYAN, KENNE: 12166 NW CR STARKE, FL 3 D () HUTCHESON, 6 S.R. 230 EAST STARKE, FL	TORS:) Delete TH C 225 2091) Delete CHARLES , RT. 1 BOX 814 N/A	ADDITIONS/CHAN Title: Name: Address: City-St-Zip: Title: Name: Address:	GES TO OFFICERS AND DIRECTOR:
DFFICER itle: lame: ddress: itly-St-Zip: itle: lame: ddress:	Electron ES AND DIREC TD () RYAN, KENNE 12166 NW CR STARKE, FL 3 D () HUTCHESON, 6 S.R. 230 EAST STARKE, FL SD () TILLEY, SUE 831 W EDWAR STARKE, FL 3 D () TATUM, TOM J	TORS:) Delete TH C 225 2091) Delete CHARLES , RT. 1 BOX 814 N/A) Delete RDS RD 2091) Delete 200-A P.O. DRAWER A	ADDITIONS/CHAN Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address: City-St-Zip:	GES TO OFFICERS AND DIRECTOR: () Change () Addition () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KENNETH C. RYAN TD 01/13/2009