2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# N08000006869

Entity Name: JACKSONVILLE VA NAT'L CEMETERY ADVISORY COMMITTEE INC

Current Principal Place of Business:

12930 RIVERMIST WAY
JACKSONVILLE, FL 32224

New Principal Place of Business:

Current Mailing Address:

PO BOX 32241
JACKSONVILLE, FL 32241

New Mailing Address:

PO BOX 56226
JACKSONVILLE, FL 32241

FEI Number: 80-0206668 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COVELLA, JOSEPH F JR
12930 RIVERMIST WAY
JACKSONVILLE, FL 32224 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: C ( ) Delete
Name: HUGHES, DAN
Address: 1 WILDWOOD PL
City-St-Zip: PALM COAST, FL 32164

Title: V ( ) Delete
Name: ROTHFELD, MICHAEL
Address: 4905 LOS ALTOS CIRCLE
City-St-Zip: ELKTON, FL 32033

Title: S ( ) Delete
Name: BERNIER, SHARAN
Address: 1319 BEE ST.
City-St-Zip: ORANGE PARK, FL 32065

Title: T ( ) Delete
Name: COVELLA, JOSEPH F JR
Address: 12930 RIVERMIST WAY
City-St-Zip: JACKSONVILLE, FL 32224

Title: G ( ) Delete
Name: HALL, GENE
Address: 2455 ELBBOW RD.
City-St-Zip: ORANGE PARK, FL 32073

Title: C ( ) Delete
Name: FOSS, ELLIOTT
Address: 109 WINDTREE LN.
City-St-Zip: KINGSLAND, GA 31548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: JOSEPH F COVELLA T 04/30/2009

Electronic Signature of Signing Officer or Director — Date