

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009026

FILED  
Mar 30, 2011  
Secretary of State

**Entity Name:** MASARYKTOWN HISTORICAL CEMETERY, INC.

**Current Principal Place of Business:**

385 MONROE AVE  
MASARYKTOWN, FL 34604

**New Principal Place of Business:**

**Current Mailing Address:**

385 MONROE AVE  
MASARYKTOWN, FL 34604

**New Mailing Address:**

366 GARFIELD AVE  
MASARYKTOWN, FL 34604

FEI Number: 26-3441891

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DODSON, LARRY E  
283 GRAND AVE  
MASARYKTOWN, FL 34604 US

**Name and Address of New Registered Agent:**

CARTER, SUSAN R  
366 GARFIELD AVE  
MASARYKTOWN, FL 34604 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: SUSAN R CARTER

03/30/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ROMINE, SIDNEY  
Address: 385 MONROE AVE.  
City-St-Zip: MASARYKTOWN, FL 34604

Title: VP  
Name: KOVACS, CHRISTINE E  
Address: 17013 BENES ROUSH RD.  
City-St-Zip: MASARYKTOWN, FL 34604

Title: T/S  
Name: CARTER, SUSAN R  
Address: 366 GARFIELD AVE  
City-St-Zip: MASARYKTOWN, FL 34604

Title: 2VP  
Name: DODSON, LARRY E  
Address: 283 GRAND AVE  
City-St-Zip: MASARYKTOWN, FL 34604

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 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 all other like empowered.

SIGNATURE: SUSAN R CARTER

T/S

03/30/2011

Electronic Signature of Signing Officer or Director

Date