

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 30 AM 10:01

DOCUMENT # N17877 (4)

1. Corporation Name

SOUTH SUMTER EVERGREEN CEMETERY ASSOCIATION, INC

Principal Place of Business

Mailing Address

% RICHARD L. BRADLEY
P.O. BOX 577, FINKLEY STREET
BUSHNELL FL 33513

% RICHARD L. BRADLEY
P.O. BOX 577, FINKLEY STREET
BUSHNELL FL 33513

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

11/20/1986

3a. Date of Last Report

01/26/1994

4. FEI Number

59-2729977

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status



\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BRADLEY, RICHARD L.
POST OFFICE BOX 577, FINKLEY STREET
BUSHNELL FL 33513

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

P

NAME

GRAHAM, ROBERT

STREET ADDRESS

C.R. 471 SOUTH

CITY- ST- ZIP

BUSHNELL FL

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE

V

NAME

DUNCAN, HENRY

STREET ADDRESS

C.R. 471 SOUTH

CITY- ST- ZIP

BUSHNELL FL

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE

S

NAME

GODFREY, MABLE

STREET ADDRESS

C.R. 227

CITY- ST- ZIP

WEBSTER FL

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE

TD

NAME

BRADLEY, RICHARD L.

STREET ADDRESS

FINKLEY STREET

CITY- ST- ZIP

BUSHNELL FL

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE

D

NAME

TAYLOR, GEORGE M.

STREET ADDRESS

JEFFERSON STREET

CITY- ST- ZIP

CENTER HILL FL

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE

D

NAME

YOUNGBLOOD, BEULAH

STREET ADDRESS

C.R. 720

CITY- ST- ZIP

BUSHNELL FL

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Richard L. Bradley TD Richard L. Bradley

1-25-95

(901) 793-3115

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #