FILE NOW: FILING FEE IS \$61.25

NQNPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # N17877

SOUTH SUMTER EVERGREEN CEMETERY ASSOCIATION, INC

Country

9. Name and Address of Current Registered Agent

25

Principal Place of Business P.O. BOX 577, FINKLEY STREET BUSHNELL FL 33513

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

23

24

Zip

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

28

29

Zip

P.O. BOX 577. FINKLEY STREET BUSHNELL FL 33513

FILED Jan 23, 1999 8:00am **Secretary of State**

01-23-1999 90047 006 ****70.00



D'

3. Date Incorporated or Qualifed

NOT APPLICABLE

5. Certificate of Status Desired

6. Election Campaign Financing

10. Name and Address of New Registered Agent

Trust Fund Contribution

11/20/1986

4. FEI Number

BRADLEY, RICHARD L. POST OFFICE BOX 577, FINKLEY STREET			82	Street Add	ress (P.O. Box Nu	mber is Not Acc	eptable)		
BUSHNELL FL 33513									
			84	City			FL	85 Zip C	e elan me.
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.									
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	ed Agen	Agent signature required when reinstating) DATE						
12.	OFFICERS AND DIRECTORS	13		<u> </u>	ADDITIONS	CHANGES TO	OFFICERS AN	DIRECTO	RS IN 12
TITLE		DELETE 1.1	TITLE					Change	☐ Addition
NAME	GRAHAM, ROBERT	1.2	NAME			•			
STREET ADDRESS	308 SOUTH PINE STREET	1.3	STREET	ADDRESS		,			
CITY-ST-ZIP	BUSHNELL FL 33513	1.4	CITY-ST	-ZIP					
TITLE		DELETE 2.1	TITLE					Change	☐ Addition
NAME	HALL, JAMES -	2.2	NAME						
STREET ADDRESS	CR 727-11423 N/A	2.3	STREET	ADDRESS					ł
CITY-ST-ZIP	WEBSTER FL 33597	2.4	CITY-S	T-ZIP	***				
TITLE	D/S	DELETE 3.1	TITLE					Change	Addition
NAME OF THE PARTY	BRADLEY, RICHARD	3.2	NAME				1133	والمحارفين	2 2.5
STREET ADDRESS	P.O. BOX 577, FINKLEY ST N/A	3.3	STREET	ADDRESS					}
CITY-ST-ZIP	BUSHNELL FL 33513		CITY-S	T- ZIP					- Addition
TITLE	D	DELETE 4.1	IIILE					Change	Addition
NAME .	TAYLOR, GEORGE M	4.:	2 NAME				÷		: 119.1 (F
STREET ADDRESS	173 JEFFERSON ST	4.3	STREET	ADDRESS					
CITY-ST-ZIP	CENTER HILL FL 33514		CITY-S	r-ZIP		1		7000	Addition
TITLE	D		TITLE	- 1				Change	☐ Addition
NAME	YOUNGBLOOD, BEULAH		NAME						· · · · · · · · · · · · · · · · · · ·
STREET ADDRESS	CR 720 A 1368 N/A			ADDRESS					į
CITY-ST-ZIP	BUSHNELL, FL 33513		CITY-S	r-ZIP		170		Change	Addition
TITLE		J DCCC.L	IIILE			•		□ cirange	17 WOODOD)
NAME		I ***	NAME						
STREET ADDRESS	最終された。 Recommendation			ADDRESS					
CITY-ST-ZIP	att the Ather information quanting with this filing door		CITY-S		Castian 440 07/2)	(i) Elorido Statu	tee I further cor	tifu that the i	oformation

Country

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I nereby certify that the information supplied with this filling does not quality for the exemption stated in Section 179.07(3)(f), Fiolida Statutes. I three certify that the indicated on this annual report or suppliemental 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

Applied For

Not Applicable

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees