2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2009
Secretary of State

DOCUMENT# N93000005016

Entity Name: FUNERAL CONSUMERS ASSOCIATION OF TAMPA BAY INC.

Current Principal Place of Business:

C/O M. SANDRA ELMORE
18902 ARBOR DR
LUTZ, FL 335485051 US

New Principal Place of Business:

Current Mailing Address:

C/O M. SANDRA ELMORE
18902 ARBOR DR
LUTZ, FL 335485051 US

New Mailing Address:

FEI Number: 59-3213555 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ELMORE, M S
18902 ARBOR DR
LUTZ, FL 335485051 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: SD ( ) Delete
Name: MORTON, JACK
Address: 712 CAMELLIA GREEN DR.
City-St-Zip: SUN CITY CENTER, FL 33573

Title: D ( ) Delete
Name: CRUIT, NANCY
Address: 18902 ARBOR DR
City-St-Zip: LUTZ, FL 33548

Title: D ( ) Delete
Name: MCGUIRE, ELIZABETH
Address: 1320 W BOGIE DR
City-St-Zip: TAMPA, FL 33612

Title: TD ( ) Delete
Name: ELMORE, M S
Address: 18902 ARBOR DR
City-St-Zip: LUTZ, FL 335485051

Title: VP ( ) Delete
Name: BROOKS, PAUL
Address: 18118 US HWY 41 LOT 25B
City-St-Zip: LUTZ, FL 33549

Title: PD ( ) Delete
Name: SCHMEISER, ROBERT
Address: 312 FAIRCROSS CIRCLE
City-St-Zip: SUN CITY CENTER, FL 33573

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: WARD, ROBERT
Address: 1921 ACADIA GREENS DR.
City-St-Zip: SUN CITY CENTER, FL 33573

Title: VP (X) Change ( ) Addition
Name: CRUIT, NANCY
Address: 18902 ARBOR DR
City-St-Zip: LUTZ, FL 33548

Title: SD (X) Change ( ) Addition
Name: MCGUIRE, ELIZABETH
Address: 1320 W BOGIE DR
City-St-Zip: TAMPA, FL 33612

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

Title: P (X) Change ( ) Addition
Name: BROOKS, PAUL
Address: 18118 US HWY 41 LOT 25B
City-St-Zip: LUTZ, FL 33549

Title: D (X) Change ( ) Addition
Name: OWENS, NAN
Address: 4704 LAKEWOOD DR
City-St-Zip: SEFFNER, FL 33584

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: M S ELMORE TD 03/13/2009

Electronic Signature of Signing Officer or Director — Date