


**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 08, 2003 8:00 am
Secretary of State

01-08-2003 90071 015 ****61.25

DOCUMENT # N 99000004536
1. Entity Name
Espanola Cemetery Association



DO NOT WRITE IN THIS SPACE

20000934

| | | | |
|--|---------|--|---------|
| 2. Principal Place of Business Flagler County CR205 | | 3. Mailing Address % Cary D. Holland | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. 52 N. St Andrews Dr | |
| City & State | | City & State Ormond Beach, FL | |
| Zip | Country | Zip | Country |
| | | 32174-3839 | |

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name Cary D. Holland

Street Address (P.O. Box Number is Not Acceptable)
52 N. St Andrews Dr.

City Ormond Beach FL Zip Code 32174-3839

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FEE IS \$61.25
Initial or Amended UBR

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees 1

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

| | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Director Flynn W. Edmondson (Pres) 807 N Anderson St. Rundell FL 32110 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Director Lila Pontius (V Pres) 55 Fort Caroline Lane Palm Coast FL 32137 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Director Ray Mercer (Sec) 410 N. Anderson St. Rundell FL 32110-0236 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Director Cary D. Holland (Treas) 52 N. St Andrews Dr. Ormond Beach FL 32174-3839 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Director Claude Sisco Deen Jr. 1347 N. Oceanshore Blvd. Flagler Beach FL 32136-0637 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

DO NOT WRITE IN THIS SPACE

CR2E037B (12/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Cary D. Holland Cary D. Holland 05 Jan 03 386.673.1119
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #