

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05667

**FILED**  
**Jan 16, 2014**  
**Secretary of State**  
**CC6557022641**

**Entity Name:** PINECREST CEMETERY ASSOCIATION, INC.

**Current Principal Place of Business:**

1345 STETSON DR. S  
COCOA, FL 32922

**Current Mailing Address:**

1345 STETSON DR. S  
COCOA, FL 32922

**FEI Number:** 59-2740315

**Certificate of Status Desired:** No

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

SCARBOROUGH, DOUG  
1345 STETSON DR. S  
COCOA, FL 32922 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name SCARBOROUGH, DOUG  
Address 1345 STETSON DR., S  
City-State-Zip: COCOA FL

Title VD  
Name SCARBOROUGH, JAMES CLAY  
Address 2 COLONIAL  
City-State-Zip: COCOA BEACH FL 32920

Title RS  
Name SCARBOROUGH, BETH  
Address 1345 STETSON DR S  
City-State-Zip: COCOA FL

Title CS  
Name BLACK, AUDREY  
Address 1336 VANCOUVER AVE. SE  
City-State-Zip: PALM BAY FL 32909

Title TD  
Name URSSING, MELBA  
Address 55 RIVERSIDE DR., #204  
City-State-Zip: COCOA FL

*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:** DOUG SCARBOROUGH

**PD**

**01/16/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date