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: ANITA C. GALLAGHER

Electronic Signature of Signing Officer/Director Detail

Name and Address of Current Registered Agent:

TOWRY, ELIZABETH C 2105 N.W. 52ND STREET OCALA, FL 34475 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

Officer/Director Detail :

Title	PD	Title	VD
Name	CHAPPELL, CHRISTOPHER	Name	GALLAGHER, ANITA C
Address	1125 S.E. 16TH ST.	Address	2121 N.W. 52ND ST.
City-State-Zip:	OCALA FL 34471	City-State-Zip:	OCALA FL 34471

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DOCUMENT# N09000010921

Entity Name: KENDRICK CEMETERY ASSOCIATION, INC.

Current Principal Place of Business:

NW 60TH STREET & NW 33RD AVE. OCALA, FL 34475

Current Mailing Address:

2105 N.W. 52ND STREET OCALA, FL 34475

FEI Number: 27-1518190

VICE PRES.

03/30/2013

FILED Mar 30, 2013 Secretary of State CC7674140217

Date

Certificate of Status Desired: No