

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000007913

**Entity Name:** HILLSIDE CEMETERY ASSOCAITION INC.

**Current Principal Place of Business:**

421 OCEAN SHORE BLVD.  
ORMOND BEACH, FL 32176

**Current Mailing Address:**

P.O. BOX 393  
ORMOND BEACH, FL 32175-0393 US

**FEI Number: 59-0919196**

**Certificate of Status Desired: Yes**

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

ROSSMEYER, SANDY  
421 OCEAN SHORE BLVD.  
ORMOND BEACH, FL 32176 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: SANDY ROSSMEYER**

**04/04/2013**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            ROSSMEYER, SANDY  
Address        421 OCEAN SHORE BLVD.  
City-State-Zip: ORMOND BEACH FL 32176

Title            VP  
Name            FOSTER, JAMES T  
Address        421 OCEAN SHORE BLVD.  
City-State-Zip: ORMOND BEACH FL 32176

Title            SECRETARY  
Name            TRELOAR, CONSTANCE  
Address        421 OCEAN SHORE BLVD.  
City-State-Zip: ORMOND BEACH FL 32176

Title            TREASURER  
Name            FOSTER, BABS  
Address        421 OCEAN SHORE BLVD.  
City-State-Zip: ORMOND BEACH FL 32176

*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: SANDY ROSSMEYER**

**PRESIDENT**

**04/04/2013**

Electronic Signature of Signing Officer/Director Detail

Date