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: BARBARA S.FOSTER	TREASURER	03/16/2017		

SIGNATURE: BARBARA S.FOSTER

Electronic Signature of Signing Officer/Director Detail

#### DOCUMENT# N1000007913

Entity Name: HILLSIDE CEMETERY ASSOCAITION INC.

#### **Current Principal Place of Business:**

215 SETON TRAIL ORMOND BEACH, FL 32176

# **Current Mailing Address:**

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

# FEI Number: 59-0919196

### Name and Address of Current Registered Agent:

ROSSMEYER, SANDY 215 OCEAN SHORE BLVD. DRUID CIRCLE ORMOND BEACH, FL 32176 US

FILED Mar 16, 2017 Secretary of State CC6349721066

Certificate of Status Desired: No

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			03/16/2017	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	PRESIDENT	Title	VP		
Name	ROSSMEYER, SANDY	Name	FOSTER, JAMES T		
Address	215 OCEAN SHORE BLVD.	Address	215 OCEAN SHORE BLVD.		
City-State-Zip:	ORMOND BEACH FL 32176	City-State-Zip:	ORMOND BEACH FL 32176		
T:41-	OF OPETADY	Title	TREASURER		
Title	SECRETARY	The	IREASURER		
Name	TRELOAR, CONSTANCE	Name	FOSTER, BARBARA S.		
Address	215 OCEAN SHORE BLVD.	Address	215 OCEAN SHORE BLVD.		
City-State-Zip:	ORMOND BEACH FL 32176	City-State-Zip:	ORMOND BEACH FL 32176		

Date