# 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT# N15000009789

Entity Name: DRAWDY-ROUSE FAMILY CEMETERY, INC.

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

4050 ROUSE ROAD ORLANDO, FL 32817

# **Current Mailing Address:**

P.O. BOX 677725 ORLANDO, FL 32867-7725

# FEI Number: 47-5598582

### Name and Address of Current Registered Agent:

ALDRIDGE, DENISE M 1249 SUNFLOWER TRAIL ORLANDO, FL 32828 US

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:

Electronic Signature of Registered Agent

#### **Officer/Director Detail :**

Title	D	Title	D
Name	LENNON, WILLIAM M	Name	WILKINSON, ANTHONY A
Address	2727 DEAN RIDGE ROAD	Address	PO BOX 941614
City-State-Zip:	ORLANDO FL 32825	City-State-Zip:	MAITLAND FL 32794
Title	D	Title	VP
Name	ROUSE, WILLIAM L	Name	LANG, LANA
Address	1655 SHORE DRIVE	Address	2913 DEAN RIDGE ROAD
City-State-Zip:	MERRITT ISLAND FL 32952	City-State-Zip:	ORLANDO FL 32825
Title	DIRECTOR, TREASURER	Title	PRESIDENT
Name	ALDRIDGE, DENISE	Name	DRAKE, CHARLES
	ALDRIDGE, DENIGE		
Address	1249 SUNFLOWER TRAIL	Address	1425 CONWAY ISLE CIRCLE
Address City-State-Zip:	1249 SUNFLOWER TRAIL		1425 CONWAY ISLE CIRCLE
	1249 SUNFLOWER TRAIL	Address	1425 CONWAY ISLE CIRCLE
City-State-Zip:	1249 SUNFLOWER TRAIL ORLANDO FL 32828	Address City-State-Zip:	1425 CONWAY ISLE CIRCLE BELLE ISLE FL 32809
City-State-Zip: Title	1249 SUNFLOWER TRAIL ORLANDO FL 32828 SECRETARY	Address City-State-Zip: Title	1425 CONWAY ISLE CIRCLE BELLE ISLE FL 32809 DIRECTOR
City-State-Zip: Title Name	1249 SUNFLOWER TRAIL ORLANDO FL 32828 SECRETARY POWELL, ELAINE 4620 SADDLEWORTH CIRCLE	Address City-State-Zip: Title Name	1425 CONWAY ISLE CIRCLE BELLE ISLE FL 32809 DIRECTOR BROWNING, EMMETT JR. P.O. BOX 677725

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: DENISE ALDRIDGE

DIRECTOR, TREASURER 04/20/2019

Electronic Signature of Signing Officer/Director Detail

# FILED Apr 20, 2019 Secretary of State 3341707142CC

rida

Date