

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000006215

Entity Name: LINCOLN CEMETERY SOCIETY LNC**Current Principal Place of Business:**600 BLOCK OF 58 STREET SOUTH
GULFPORT,, FL 33707**Current Mailing Address:**P.O. BOX 531361
GULFPORT, FL 33747**FEI Number: 81-3076323****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BACON, BACON & FURLONG
2959 1ST AVENUE NORTH
SAINT PETERSBURG, FL 33713 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	P
Name	GRAY, VANESSA
Address	P.O. BOX 531361
City-State-Zip:	ST. PETERSBURG FL 33747

Title	VP
Name	HARKER, JON
Address	P.O. BOX 531361
City-State-Zip:	ST. PETERSBURG FL 33747

Title	SEC
Name	CORCORAN, DARLENE
Address	P.O. BOX 531361
City-State-Zip:	ST. PETERSBURG FL 33747

Title	TREASURER
Name	CARCIONE, TONI
Address	P.O. BOX 531361
City-State-Zip:	ST. PETERSBURG FL 33747

Title	OTHER
Name	LAMONS, JOHNNIE
Address	P.O. BOX 531361
City-State-Zip:	ST. PETERSBURG FL 33747

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: VANESSA GRAY**PRESIDENT****04/30/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date