

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17877

Entity Name: SOUTH SUMTER EVERGREEN CEMETERY ASSOCIATION, INC**Current Principal Place of Business:**5640 COUNTY ROAD 569
CENTER HILL, FL 33514**Current Mailing Address:**P.O. BOX 1073
BUSHNELL, FL 33513 US**FEI Number:** 59-2729977**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KIRNES, URSULA RENEE MRS.
5640 COUNTY ROAD 569
CENTER HILL, FL 33514 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:** URSULA RENEE KIRNES

04/12/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT/DIRECTOR
Name KIRNES, URSULA RENEE MRS.
Address 5640 COUNTY ROAD 569
City-State-Zip: CENTER HILL FL 33514

Title SECRETARY/DIRECTOR
Name SANDERS, GLORIA MRS..
Address 1454 S.W. 69TH. ROAD
City-State-Zip: BUSHNELL FL 33513

Title CFO/FINANCIAL SECRETARY
Name HENDERSON, MAE WILLIS MRS.
Address 11423 COUNTY ROAD 727
City-State-Zip: WEBSTER FL 33597

Title TREASURER
Name SCOTT, MYRA MRS.
Address 12161 S.E. 84TH. AVENUE
City-State-Zip: BELLVIEW FL 34420

Title OFFICER/DIRECTOR
Name HALL, JAMES BISHOP
Address 3694 COUNTY ROAD 754
City-State-Zip: WEBSTER FL 33597

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: MAE HENDERSON**CEO?FINANCIAL
SECRETARY**

04/12/2018

Electronic Signature of Signing Officer/Director Detail

Date