

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N38497

**Entity Name:** AVON PARK CEMETERY ASSOCIATION

**Current Principal Place of Business:**

AVON PARK CEMETERY ASSOC  
591 N US 27 HWY  
AVON PARK, FL 33825

**Current Mailing Address:**

PO BOX 27  
AVON PARK, FL 33826

**FEI Number:** 59-0751585

**Certificate of Status Desired:** No

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

MENEELY, DIANA R  
402 N DOVER RD  
AVON PARK, FL 33825 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:** DIANA R MENEELY

02/12/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name MENEELY, DIANA R  
Address 402 N DOVER RD  
City-State-Zip: AVON PARK FL 33825

Title VP  
Name WARD, R E  
Address 2301 N THOMAS RD  
City-State-Zip: AVON PARK FL 33825

Title DIRECTOR  
Name LEMLER, DIANE  
Address 403 N DELANEY AVE  
City-State-Zip: AVON PARK FL 33825

Title DIRECTOR  
Name RODGERS, IDAVA  
Address 1432 S GOLFVIEW DR  
City-State-Zip: AVON PARK FL 33825

Title SUPT  
Name POLSTON, DONALD E  
Address 2401 PRESTON AVE  
City-State-Zip: SEBRING FL 33875

Title DIRECTOR  
Name GAMEZ, CARLOS  
Address 3117 CALYPSO DR  
City-State-Zip: AVON PARK FL 33825

Title DIRECTOR  
Name BARBEN, WILLIAM M  
Address 2093 E HARTTS DESIRE LANE  
City-State-Zip: AVON PARK FL 33825

Title PRESIDENT  
Name GARCIA, MARCOS  
Address 405 ABBOT ST  
City-State-Zip: AVON PARK FL 33825

**Continues on page 2**

*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:** DIANA R MENEELY

SECRETARY

02/12/2024

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title           TREASURER  
Name           BARKER, KANDICE N  
Address        30 W RAYMOND ST  
City-State-Zip: AVON PARK FL 33825