## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42938

**Entity Name: MARTIN VANBUREN VANNESS FAMILY CEMETERY** 

ASSOCIATION/CORPORATION

**Current Principal Place of Business:** 

360 CROFT AVENUE INVERNESS, FL 34452

111121111200, 12 01102

**PO BOX 226** 

LECANTO, FL 34460 US

**Current Mailing Address:** 

FEI Number: 59-3070614 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VAN NESS, THOMAS MJR. ESQ 1205 N. MEETING TREE BLVD. CRYSTAL RIVER, FL 34429 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

FILED Jan 13, 2015

**Secretary of State** 

CC9850110456

Officer/Director Detail:

Title D Title D

Name HINKLE, DAVID M Name NAYLOR, DOUGLAS

Address 3551 NE 150TH AVE. Address PO BOX 226

City-State-Zip: WILLISTON FL 32696 City-State-Zip: LECANTO FL 34460

Title D Title D

Name CROFT, DAVID Name CHAPPELL, CARLTON

Address 3680 W STARLIGHT PATH Address 2031 HILL-N-DALE NORTH

City-State-Zip: LECANTO FL 34461 City-State-Zip: TALLAHASSEE FL 32317

Title D

Name VAN NESS, WALTER R
Address 4881 E. VANNESS RD.
City-State-Zip: HERNANDO FL 34442

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: DOUGLAS D. NAYLOR

DIRECTOR

01/13/2015