

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000727

**FILED
Apr 29, 2013
Secretary of State
CC5325969308**

Entity Name: MOUNT OLIVE PRIMITIVE CEMETERY, INC.

Current Principal Place of Business:

1617 STEPHANIE LANE
LAKELAND, FL 33813

Current Mailing Address:

PO BOX 7114
LAKELAND, FL 33807

FEI Number: 65-0664866

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KILPATRICK, MARTHA
1617 STEPHANIE LANE
LAKELAND, FL 33813 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	VD	Title	PRESIDENT
Name	LUCAS, GILBERT O	Name	HOWELL, GUY E
Address	5315 GLENMORE DR.	Address	5924 LUNN RD.
City-State-Zip:	LAKELAND FL 33813	City-State-Zip:	LAKELAND FL 33811

Title STD
Name KILPATRICK, MARTHA N
Address 1617 STEPHANIE LANE
City-State-Zip: LAKELAND FL 33813

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: MARTHA N KILPATRICK

STD

04/29/2013

Electronic Signature of Signing Officer/Director Detail

Date