PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORMOVED						
AFPLICATION FLORIDA DEPARTMENT OF STA			AND AND			
FOR	FOR Sandra B. Mortham		FILED			
REINSTATEMENT	Secretary of State			98 DEC -8 PN 3: 38		
DIVIDION OF CONFORMIONS						
DOCUMENT # 018103 1. Corporation Name			SECRETARY OF STATE TALLAHASSEE, FLORIDA			
EDGEWOOD CEMETERY ASSOCIATION			<u> </u>			
ncipal Place of Business Mailing Address				#1 17##\$ 18(#) 19#1) ##1## (16) #1#	//) \$10/1 W/0/2 W/0/1 W/0/2 B/0/1 200/	
BOX 312 JACKSONVILLE FL 32201	BOX 312 JACKSONVILLE FL 32201	E FL 32201				
Make and decrease and because Alexander			PEIN	STATEME	NT 96 90	
above addresses are incorrect in any way, line through incorrect information and enter New Principal Office Address, If Applicable 3. New Mailing Office Address, If			Date Incorp.	orated or Qualified	<u> </u>	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	etc.		ness in Florida	12/26/1929	
City & State	City & State	5. FEI Num		59-0230470	Applied For Not Applicable	
Zip Country	Zip	Country	6. CERTIFICATE	OF STATUS DESIRED	\$8.75 Additional Fee required for a Certificate of Status	
7. Names and Street Addresses of Each Officer and/o					;	
Title(s) and/or Directors	Name of Officers Stre and/or Directors 3 (Do NOT Use		Or City / State / Zip Numbers) 4			
PRICE, WARREN E.		764 QUEENS HARBOUR BLVD		JACKSONVILLE FL	32225	
PRICE, ROBERT W.	- 8114 CAYL	8114-CAYUCA TR. W.		JACKSONVILLE FL-		
D/s	1875 /	1875 Hickory LANE		ATVANTE	BEACH, FL 32230	
D/V PRICE, CLIFFORD E. JR.	1728 ALDE	1728 ALDER DR.		ORANGE PARK FL	32273	
PRICE, RICHARD A.	4420 MON	4420 MONUMENT PT. RD.		1049KS9N/HEFI 0400S -12/11/9801083-4225		
D/T				***1050.00 ***1050.00		
D JAMES LILLIAN ? D WEST, BETTY ?	9645	9645 VILLIERS DR.S.		JACKSONVILL		
	2255	2255 KEMP ROAD 715 CLARENSON DR		BEAVERCREE	K, OH 45431	
J PRICE, JAMES M.		CAREMOON		LANCASTER,	SC 29720	
8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent						
-PRICE, ROBERT W		Street Address (F	Street Address (P.O. Box Number is Not Acceptable)			
764 d			PUEEN.	S HARBOUR	e BC	
Control of the state of the sta						
PRICE, WARREN E. TOYOUTENS MARSONE BL. City State Zip Code						
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.						
Signature of Registered Agent Warrle & Proces						
REGISTERED AGENT MUST SIGN						
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No No (See other side for information on intangible tax.)						
12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.						
SIGNATURE: WARREN E. PRICE 11-18-98 904-220-9445 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Daytime Phone #						
