## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 183938** 

Entity Name: SOUTHERN KEYS CEMETERY, INCORPORATED

FILED Apr 17, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

258 AVENUE "A", BIG COPPITT KEY

KEY WEST, FL 33040

258 AVENUE A

BIG COPPITT KEY

KEY WEST, FL 33040

Current Mailing Address: New Mailing Address:

8956 HUNTINGTON PT DR 8956 HUNTINGTON POINTE DR

SARASOTA, FL 34238 SARASOTA, FL 34238

FEI Number: 59-0754893 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

THURMOND, MARTINA 258 AVENUE "A", BIG COPPITT KEY KEY WEST, FL 33040 US

258 AVENUE A BIG COPPITT KEY KEY WEST, FL 33040 US

THURMOND, MARTINA

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: 04/17/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete Title: PSTD (X) Change ( ) Addition

 Name:
 THURMOND, MARTINA
 Name:
 THURMOND, MARTINA

 Address:
 258 AVENUE
 Address:
 258 AVENUE A

 Address:
 258 AVENUE
 Address:
 258 AVENUE A

 City-St-Zip:
 KEY WEST, FL 33040
 City-St-Zip:
 KEY WEST, FL 33040

Title: VSTD ( ) Delete Title: VSTD (X) Change ( ) Addition

Name: OWENS, GAYLE Name: OWENS, GAYLE

Address: 8956 HUNTINGTON PT DR Address: 8956 HUNTINGTON POINTE DR City-St-Zip: SARASOTA, FL 34238 City-St-Zip: SARASOTA, FL 34238

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARTINA THURMOND PRES 04/17/2009