2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2009
Secretary of State

DOCUMENT# 213283

Entity Name: OSCEOLA MEMORY GARDENS, INC.

Current Principal Place of Business:

1717 OLD BOGGY CREEK RD
KISSIMMEE, FL 34744 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 420174
KISSIMMEE, FL 34742 US

New Mailing Address:

FEI Number: 59-0837763 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROBERTS, TERRY L S
2665 HILLIARD CT.
KISSIMMEE,, FL 34744 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: RUSSELL, ROBERT D.,
Address: 200 N. FEDERAL HWY.
City-St-Zip: POMPANO BCH., FL

Title: S ( ) Delete
Name: ROBERTS, TERRY LEE,
Address: 2665 HILLIARD CT
City-St-Zip: KISSIMMEE, FL

Title: D ( ) Delete
Name: DEPPEN, RANDY,
Address: 15516 92ND COURT, NORTH
City-St-Zip: WEST PALM BEACH, FL 33412

Title: D ( ) Delete
Name: JUDGE JAMES,
Address: 100 INNSBROOK DRIVE
City-St-Zip: LAKE TOXAWAY,, NC 28747

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: TERRY L ROBERTS S 02/14/2009

Electronic Signature of Signing Officer or Director Date