2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Secretary of State DOCUMENT # 705131 1. Entity Name 03-10-2006 90008 014 ****61.25 SILOAM CEMETERY ASSOCIATION INC. Principal Place of Business Mailing Address 8842 SOUTHWEST STATE ROAD 247 8842 SOUTHWEST STATE ROAD 247 LAKE CITY FL 32024 LAKE CITY FL 32024 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State 4. FEI Number City & State Applied For 59-1821796 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JAMES I. TERRY Street Address (P.O. Box Number is Not Acceptable) 8842 SOUTHWEST STATE ROAD 247 LAKE CITY FL 32024 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PD TITLE ☐ Delete TITLE ☐ Change Addition JOHN, KEENE NAME STREET ADDRESS 373 216 STREET STREET ADDRESS LAKE CITY FL 32024 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition TERRY, JAMES I NAME NAME 8842 SOUTHWEST STATE ROAD 247 STREET ADORESS STREET ADDRESS CITY-ST-ZIP LAKE CITY FL 32024 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition TERRY, WAYNE M NAME NAME STREET ADDRESS 8842 SOUTHWEST STATE ROAD 247 STREET ADDRESS CITY-ST-ZIP LAKE CITY FL 32024 CITY-ST-7/P TITLE D ☐ Delete TITLE ☐ Change ☐ Addition NAME KEENE, JOHN NAME STREET ADDRESS 3734 216 STREET STREET ADDRESS CITY-ST-ZIP LAKE CITY FL 32024 CITY-ST-ZIP SD TITLE ☐ Delete ☐ Change ☐ Addition TERRY, CAROL L NAME NAME STREET ADDRESS 8842 SOUTHWEST STATE ROAD 247 STREET ADDRESS LAKE CITY FL 32024 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition CHUCK, CHAFIN NAME SEIFERT, RANDY NAME STREET ADDRESS 4323 200TH ST 19815 LOUNTY ROAD 137 STREET ADDRESS LAKE CITY FL 32-0244 WELLBORN, FL. 32094 CITY-ST-ZIP CITY-ST-ZIP

FILED

Mar 10, 2006 8:00 am

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

James J. Jens JAMES T. TERRY 27 FEB. 06 380, 762, 3523