

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713558

FILED
Aug 14, 2008
Secretary of State

Entity Name: CHRISTMAS CEMETERY ASSOCIATION, INC.

Current Principal Place of Business:

23644 CHRISTMAS CEMETERY RD.
CHRISTMAS, FL 32709 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 76
CHRISTMAS, FL 32709 US

New Mailing Address:

FEI Number: 59-6151076 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

TATE, ROBERTA
23780 CHRISTMAS CEMETERY
CHRISTMAS, FL 32709 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

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: CLARK, SAMMY
Address: 1033 N FORT CHRISTMAS ROAD
City-St-Zip: CHRISTMAS, FL 32709

Title: T () Delete
Name: TATE, ROBERT
Address: 23780 CHRISTMAS CEMETERY ROAD
City-St-Zip: CHRISTMAS, FL 32709

Title: AT () Delete
Name: HARRISON, JOY
Address: 734 N SPARKMAN AVE
City-St-Zip: ORANGE CITY, FL 32763

Title: S () Delete
Name: YATES, MELISSA
Address: 25451 LUKE STREET
City-St-Zip: CHRISTMAS, FL 32709

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CLARK, SAMMY
Address: 1033 N FORT CHRISTMAS ROAD
City-St-Zip: CHRISTMAS, FL 32709

Title: AT (X) Change () Addition
Name: TATE, ROBERTA
Address: 23780 CHRISTMAS CEMETERY ROAD
City-St-Zip: CHRISTMAS, FL 32709

Title: T (X) Change () Addition
Name: HARRISON, JOY
Address: 734 N SPARKMAN AVE
City-St-Zip: ORANGE CITY, FL 32763

Title: VP (X) Change () Addition
Name: YATES, MELISSA
Address: 25451 LUKE STREET
City-St-Zip: CHRISTMAS, FL 32709

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERTA TATE

AT

08/14/2008

Electronic Signature of Signing Officer or Director

Date