

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717358

FILED  
Apr 07, 2009  
Secretary of State

**Entity Name:** SOUTHPORT MEMORIAL GARDENS, INCORPORATED

**Current Principal Place of Business:**

WEST END OF FIFTH STREET  
P.O. BOX 8824  
SOUTHPORT, FL 32409

**New Principal Place of Business:**

WEST END OF FIFTH STREET  
WEST END OF 5TH STREET  
SOUTHPORT, FL 32409

**Current Mailing Address:**

SOUTHPORT MEMORIAL GARDENS  
PO BOX 8052  
SOUTHPORT, FL 32409 US

**New Mailing Address:**

**FEI Number:** 37-1581185      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

KELLY, L J  
1117 4TH CIRCLE  
SOUTHPORT, FL 32409 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

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: KYSER, J.T  
Address: 7600 NORTH GAINER ROAD  
City-St-Zip: SOUTHPORT, FL 32409

Title: D ( ) Delete  
Name: KELLY, L J  
Address: 1117 4TH CIRCLE  
City-St-Zip: SOUTHPORT, FL 32409

Title: ST ( ) Delete  
Name: YOUNGBLOOD, BOBBY  
Address: 1528 2ND STREET  
City-St-Zip: SOUTHPORT, FL 32409

Title: D ( ) Delete  
Name: NEWELL, JESSIE  
Address: BOX 2337  
City-St-Zip: SOUTHPORT, FL 32409

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

SIGNATURE: BOBBY YOUNGBLOOD

SEC

04/07/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date