

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724431

FILED
Feb 17, 2010
Secretary of State

Entity Name: FELLOWSHIP BAPTIST CEMETERY ASSOCIATION, INC.

Current Principal Place of Business:

C/O FELLOWSHIP BAPTIST CEMETERY ASSOC.,
OCALA, FL 34478 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1643
OCALA, FL 34478 US

New Mailing Address:

FEI Number: 59-0380927

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BATTLE, LUCINDA J
19251 S.E. 2ND ST
WILLISTON, FL 32696 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
Name: FIELD, GERALDYNE
Address: 10125 NW 28TH PL
City-St-Zip: OCALA, FL 34482

Title: TS
Name: BATTLE, LUCINDA J
Address: 19251 S.E. 2ND ST.
City-St-Zip: WILLISTON, FL 32696

Title: D
Name: BATTLE, REGINALD
Address: 19251 S.E. 2ND ST.
City-St-Zip: WILLISTON, FL 32696

Title: D
Name: HILL, JACK
Address: 11261 NW 8TH ST
City-St-Zip: OCALA, FL 34482

Title: D
Name: HOSKINS, TERRY E
Address: 4969 SW 36TH LANE
City-St-Zip: OCALA, FL 34474

Title: D
Name: PIXLEY, JAMES D
Address: 663 NW 80TH AVE
City-St-Zip: OCALA, FL 34482

I hereby 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 all other like empowered.

SIGNATURE: LUCINDA J BATTLE

TS

02/17/2010

Electronic Signature of Signing Officer or Director

Date