

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733063

FILED  
Feb 22, 2007  
Secretary of State

**Entity Name:** INTERNATIONAL INDEPENDENT SHOWMEN'S CEMETERY ASSOCIATION, INC.

**Current Principal Place of Business:**

6915 RIVERVIEW DR.  
RIVERVIEW, FL 33569

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 188  
GIBSONTON, FL 33534 US

**New Mailing Address:**

**FEI Number:** 23-7405685      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

MCEWEN, DAVID B.  
560 FIRST AVENUE NORTH  
ST. PETERSBURG, FL 33701 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: PD ( ) Delete  
Name: JEONNOTTE, PAUL  
Address: 1603 PASADENA DR.  
City-St-Zip: SEFFNER, FL 33584

Title: TD ( ) Delete  
Name: GAGNE, ROLAND  
Address: 2609 IRENE ST  
City-St-Zip: LUTZ, FL 33549

Title: SD ( ) Delete  
Name: SIKES, CAROL J  
Address: 6111 PALM AVENUE  
City-St-Zip: GIBSONTON, FL 33534

Title: VD ( ) Delete  
Name: COBURN, MICHAEL  
Address: 1603 PASADENA AVE.  
City-St-Zip: SEFFNER, FL 33584

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VD (X) Change ( ) Addition  
Name: SKRIVANIE, HELEN  
Address: 1511 RIVERDRIVE  
City-St-Zip: RUSKIN, FL 33570

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

Title: TD (X) Change ( ) Addition  
Name: COBURN, MICHAEL  
Address: 1603 PASADENA AVE.  
City-St-Zip: SEFFNER, FL 33584

I hereby certify that the information supplied with this filing does not qualify for the 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: CAROL J. SIKES

SD

02/22/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date