2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 08, 2009
Secretary of State

DOCUMENT# 741283

Entity Name: WILLIAMS CEMETERY ASSOCIATION, INC.

Current Principal Place of Business:

10550 FT. KING RD.
DADE CITY, FL 33525 US

New Principal Place of Business:

5845 YORKSHIRE DRIVE
ZEPHYRHILLS, FL 33542 US

Current Mailing Address:

8833 HANDCART ROAD
ZEPHYRHILLS, FL 33545 US

New Mailing Address:

5845 YORKSHIRE DRIVE
ZEPHYRHILLS, FL 33542 US

FEI Number: 59-1751134 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
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:

SUMNER, ROBERT D
14150 6 STREET
DADE CITY, FL 33525 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: GASKIN, MONROE
Address: 10231 CURLEY ROAD
City-St-Zip: SAN ANTONIO, FL 33576

Title: SD ( ) Delete
Name: BOHANNON, GLORIA
Address: 10000 FT KING RD
City-St-Zip: DADE CITY, FL 33525

Title: VP ( ) Delete
Name: DEW, WILBUR I.
Address: 10550 FT KING RD
City-St-Zip: DADE CITY, FL 33525

Title: T ( ) Delete
Name: GASKIN, DAVID
Address: 8833 HANDCART ROAD
City-St-Zip: ZEPHYRHILLS, FL 33545

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: T (X) Change ( ) Addition
Name: GASKIN, DAVID
Address: 5845 YORKSHIRE DRIVE
City-St-Zip: ZEPHYRHILLS, FL 33542

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: DAVID W. GASKIN TREA 05/08/2009
Electronic Signature of Signing Officer or Director Date