

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743605

FILED
Apr 13, 2009
Secretary of State

Entity Name: NEW MONROVIA CEMETERY, INC.

Current Principal Place of Business:

4450 S.E. COVE ROAD
P.O.BOX 903
PORT SALERNO, FL 34992

New Principal Place of Business:

4450 S.E. COVE ROAD
PORT SALERNO, FL 34992

Current Mailing Address:

P.O.BOX 903
PORT SALERNO, FL 34992

New Mailing Address:

FEI Number: 59-1986513

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATTERSON, GERMAINE
4450 S.E. COVE ROAD
PO BOX 903
PORT SALERNO, FL 34992 US

Name and Address of New Registered Agent:

PATTERSON, GERMAINE
4450 S.E. COVE ROAD
PORT SALERNO, FL 34992 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: _____

04/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: PATTERSON, GERMAINE
Address: 7765 SE HILLTOP TERRACE
City-St-Zip: HOBE SOUND, FL 33455

Title: SD () Delete
Name: PATTERSON, GLORIA
Address: 7765 SE HILLTOP TEN
City-St-Zip: HOBE SOUND, FL 33455

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: GERMAINE PATTERSON

PRES

04/13/2009

Electronic Signature of Signing Officer or Director

Date