FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

(1)

CORINTH CHURCH CEMETERY ASSOCIATION, INCORPORATE

T TITICIPAL FIAC	e of Business	Mailing Address			- I SADINI IBANA BIRNA BIRNA NIBER HARVA NOBEL BIRNIN O	iann dian Aibis aigh gagal isbl	
P O BOX 1212 LAKE CITY FL 32056		P O BOX 1212 LAKE CITY FL 32056					
					3. Date Incorporated or Qualified		
US		US			03/01/1979		
					4. FEI Number	Applied For	
					51-0183253	Not Applicab	
2. Principal Place of Business		2a. Mailing Address 26			5. Certificate of Status Desired	\$8.75 Additional Fee Regulred	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
City & State		City & State		7. Is this nonprofit corporation a homeowne			
3		28				□ No	
Zip	Country	Zip	Country	у	8. This corporation owes or has paid the ci	urrent vear Intancible	
4	25	29	30		Personal Property Tax due June 30.	Yes 🔼 No	
	rent Registered Agent			10. Name and Address of New Registered	Agent		
			81	Name			
OGDEN, MARGIE RT 8 BOX 422 LAKE CITY FL 32055			<u> </u>				
			82	82 Street Address (P.O. Box Number is Not Acceptable)			
			83	 			
D14 0.			L				
			84	1	FI	85 Zip Code	
11 Discourant	in the provisions of Sections 617.0	EDD and C17 1500 Florida Diet.					
office or r	orietorad agant or hoth in the Ct	NOC BIO 617. 1506, FIORIDA STATUTA	es, the abov	e-named corp	oration submits this statement for the purpose	of changing its registered	
office or re agent. I as	egistered agent, or both, in the Sta m familiar with, and accept the ob-	ate of Florida. Such change was a ligations of, Section 617.0503, Fig.	es, the abov authorized b orida Statute	re-named corporations.	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	of changing its registered pointment as registered	
agent. I a	egistered agent, or both, in the Sta m familiar with, and accept the ob	202 and 617.1008, Florida Statuli ate of Florida. Such change was ε ligations of, Section 617.0503, Flo	es, the abov authorized b orida Statute	re-named corporations.	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	of changing its registered pointment as registered	
agent. I a	egistered agent, or both, in the Sta m familiar with, and accept the ob-	ate of Florida. Such change was a digations of, Section 617.0503, Flo	authorized b orida Statute	ve-named corporations.	on's board of directors. I hereby accept the ap	of changing its registered pointment as registered	
agent. I an	egistered agent, or both, in the Ste m familiar with, and accept the ob Signature, typed or printed name of registered OFFICERS A	ate of Florida. Such change was a ligations of, Section 617.0503, Floridations of, Section 617.0503, Floridations of the agent and title if applicable (NOTE AND DIRECTORS	authorized b orida Statute	y the corporati	on's board of directors. I hereby accept the ap	pointment as registered	
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agent. I an SIGNATURE _ IZ.	egistered agent, or both, in the Ste m familiar with, and accept the ob Signature, typed or printed name of registered OFFICERS A	ate of Florida. Such change was a ligations of, Section 617.0503, Floridations of, Section 617.0503, Floridations of the agent and title if applicable (NOTE AND DIRECTORS	Buthorized biorida Statute E: Registered Ag 13.	ry the corporations.	on's board of directors. I hereby accept the ap	D DIRECTORS IN 12	
agent. I as SIGNATURE _ 12.	egistered agent, or both, in the Ste m familiar with, and accept the ob Signature, typed or printed name of registered OFFICERS A	ate of Florida. Such change was a ligations of, Section 617.0503, Floridations of, Section 617.0503, Floridations of the agent and title if applicable (NOTE AND DIRECTORS	E: Registered Ap 13. 1.1 TITLE 1.2 NAME	by the corporations.	on's board of directors. I hereby accept the ap	D DIRECTORS IN 12	
agent. I a SIGNATURE	egistered agent, or both, in the Stem familiar with, and accept the ob Signature, typed or printed name of registered OFFICERS A D DAVIS, LORENE	ate of Florida. Such change was a ligations of, Section 617.0503, Floridations of, Section 617.0503, Floridations of the agent and title if applicable (NOTE AND DIRECTORS	E: Registered Ap 13. 1.1 TITLE 1.2 NAME 1.3 STREE	ty the corporations.	on's board of directors. I hereby accept the ap	D DIRECTORS IN 12	
Agent. I as agent	signature agent, or both, in the Stem familiar with, and accept the ob Signature typed or printed name of registered OFFICERS A D DAVIS, LORENE RT. 1 BOX 147-D	ate of Florida. Such change was a ligations of, Section 617.0503, Floridations of Section 617.0503, Floridation 617.0503, Floridatio	E: Registered Ap 13. 1.1 TITLE 1.2 NAME	t ADDRESS ST-ZIP	on's board of directors. Thereby accept the ap	D DIRECTORS IN 12 Change Addition	
Agent. I as agent.	signature agent, or both, in the Stem familiar with, and accept the ob Signature hiped or printed name of registered OFFICERS A D DAVIS, LORENE RT. 1 BOX 147-D LAKE CITY FL	ate of Florida. Such change was a ligations of, Section 617.0503, Floridations of, Section 617.0503, Floridations of the agent and title if applicable (NOTE AND DIRECTORS	E: Registered Ap 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY: \$2.1 TITLE	t ADDRESS ST-ZIP	on's board of directors. Thereby accept the ap	D DIRECTORS IN 12 Change Addition	
Agent. I at a gent. I	Signature hiped or printed name of registered OFFICERS A D DAVIS, LORENE RT. 1 BOX 147-D LAKE CITY FL VD DURRANCE, WILLIAM	ate of Florida. Such change was a ligations of, Section 617.0503, Floridations of Section 617.0503, Floridation 617.0503, Floridatio	E: Registered Ap 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY - S 2.1 TITLE 2.2 NAME	t ADDRESS ST-ZIP	on's board of directors. Thereby accept the ap	D DIRECTORS IN 12 Change Addition	
Agent. I as agent.	signature agent, or both, in the Stem familiar with, and accept the ob Signature hiped or printed name of registered OFFICERS A D DAVIS, LORENE RT. 1 BOX 147-D LAKE CITY FL	ate of Florida. Such change was a ligations of, Section 617.0503, Floridations of Section 617.0503, Floridation 617.0503, Floridatio	E: Registered Ap 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY - S 2.1 TITLE 2.2 NAME	t ADDRESS ST-ZIP	Advisor reinstating) Advisor reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12 Change Addition	

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

3.2 NAME

4.1 TITLE

4.2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

3.4. CITY-ST-ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

3.3 STREET ADDRESS | Rt.17, Box 1688

OGDEN, MARGIE

LARRAMORE, JEANELLE

RT 8 BOX 422

LAKE CITY FL

RT 10 BOX 901

LK CITY, FL 00000

GREENE, ROY A

RT. 12 BOX 156

LAKE CITY FL

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

NAME

DELETE

DELETE

DELETE

4-14-98

904-755-8248

Addition

Addition

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☐ Change

Change

Change

FILED

Apr 20 1998 8:00am

Secretary of State

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