

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 13, 2007 08:00 AM
Secretary of State

DOCUMENT # 764455

1. Entity Name
EHREN CEMETARY ASSOCIATION INC.



Principal Place of Business
P.O. BOX 1601
LAND O'LAKES, FL 34639

Mailing Address
P.O. BOX 1601
LAND O'LAKES, FL 34639



03262007 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2194005

Applied For
Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BALDREE, DAVID
13221 OAKWOOD DRIVE
HUDSON, FL 34669

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000706864
04/24/07-80053-003 70.00

10. OFFICERS AND DIRECTORS

TITLE D
NAME TOLER, STEVE
STREET ADDRESS 23311 JEROME ROAD
CITY-ST-ZIP LAND O LAKES, FL 34639

TITLE CD
NAME BLADREE, DAVID
STREET ADDRESS 13221 OAKWOOD DRIVE
CITY-ST-ZIP HUDSON, FL 34669

TITLE D
NAME ROGERS, LLOYD
STREET ADDRESS 8058 W. CHASSAHOWITZKA STREET
CITY-ST-ZIP HOMOSASSA, FL

TITLE D
NAME SNYDER, VIVIAN
STREET ADDRESS 9412 N EDISON AVENUE
CITY-ST-ZIP TAMPA, FL 33612

TITLE D
NAME MCCALL, BETTY
STREET ADDRESS 4235 BRYAN ROAD
CITY-ST-ZIP LAND O LAKES, FL 34639

TITLE STD
NAME WARD, LINDA T.
STREET ADDRESS P O BOX 123 N/A
CITY-ST-ZIP BROOKSVILLE, FL

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Linda T. Ward* LINDA T. WARD

4-10-07 3527961236

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #