

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768973

FILED  
Mar 26, 2005  
Secretary of State

**Entity Name:** JUDD CEMETERY ASSOCIATION, INCORPORATED

**Current Principal Place of Business:**

1635 PHILIPS MANOR RD  
FERNANDINA BEACH, FL 32034

**New Principal Place of Business:**

**Current Mailing Address:**

1635 PHILIPS MANOR RD  
MANOR ROAD  
FERNANDINA BEACH, FL 32034

**New Mailing Address:**

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

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

HALL, MYRTLE C.  
1373 MANUCY ROAD  
FERNANDINA BEACH, FL 32034      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:                      VPD                      ( ) Delete  
Name:                      HILDRETH, MARY E.  
Address:                      1231 FORREST DRIVE  
City-St-Zip:                      FERNANDINA BCH, FL

Title:                      D                      (X) Delete  
Name:                      LOHMAN, RUDY,  
Address:                      4921 SUAREZ BLUFF ROAD  
City-St-Zip:                      FERNANDINA BCH, FL

Title:                      SD                      ( ) Delete  
Name:                      TAYLOR, ANITA H,  
Address:                      3235 WINTERBERRY AVENUE  
City-St-Zip:                      FERNANDINA BCH, FL

Title:                      P                      ( ) Delete  
Name:                      HALL, MYRTLE C.,  
Address:                      1373 MANUCY ROAD  
City-St-Zip:                      FERNANDINA BCH, FL

Title:                      TD                      ( ) Delete  
Name:                      COLLINS JANE P,  
Address:                      1635 PHILIPSMANOR ROAD  
City-St-Zip:                      FERNANDINA BCH, FL

Title:                      D                      ( ) Delete  
Name:                      HALL, LOWELL  
Address:                      2021 SOUTH FLETCHER AVENUE  
City-St-Zip:                      FERNANDINA BEACH, FL

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

Title:                      VPD                      (X) Change ( ) Addition  
Name:                      HILDRETH, MARY E.  
Address:                      1231 FORREST DRIVE  
City-St-Zip:                      FERNANDINA BCH, FL 32034

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

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

Title:                      P                      (X) Change ( ) Addition  
Name:                      HALL, MYRTLE C.,  
Address:                      1373 MANUCY ROAD  
City-St-Zip:                      FERNANDINA BCH, FL 32034

Title:                      TD                      (X) Change ( ) Addition  
Name:                      COLLINS JANE P,  
Address:                      1635 PHILIPS MANOR ROAD  
City-St-Zip:                      FERNANDINA BCH, FL 32034

Title:                      D                      (X) Change ( ) Addition  
Name:                      HALL, LOWELL  
Address:                      2021 SOUTH FLETCHER AVENUE  
City-St-Zip:                      FERNANDINA BEACH, FL 32034

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JANE P. COLLINS

TD

03/26/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date