

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005918

FILED
Mar 31, 2009
Secretary of State

Entity Name: FUNERAL & CEMETERY ALLIANCE, INC.

Current Principal Place of Business:

3165 MCCRORY PLACE, STE 185
ORLANDO, FL 32803

New Principal Place of Business:

Current Mailing Address:

PO BOX 561008
MIAMI, FL 33256

New Mailing Address:

FEI Number: 65-1132916

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLEMAN, PHILLIP LLOYD
9013 SW 78 PL
MIAMI, FL 33156 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: D () Delete
Name: USELTON, MIKE
Address: 3904 CORTEZ RE WEST
City-St-Zip: BRADENTON, FL 34210

Title: ST () Delete
Name: COLEMAN, PHILLIP LLOYD
Address: PO BOX 561008
City-St-Zip: MIAMI, FL 332561008

Title: D () Delete
Name: KINZER, DOUGLAS
Address: 1930 SW 10 ST
City-St-Zip: BOCA RATON, FL 33486

Title: D () Delete
Name: DANIELS, DAVID
Address: 7303 BARCOCK BLVD
City-St-Zip: PALM BAY, FL 32909

Title: P () Delete
Name: JENKINS, LARRY
Address: 400 WOODLAWN CEETERY RD.
City-St-Zip: GOTH, FL 34734

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: GILMORE, DEBORAH
Address: 106 KNOWLWOOD ESTATS DR
City-St-Zip: ORMOND BEACH, FL 32174

Title: SD (X) Change () Addition
Name: COLEMAN, PHILLIP LLOYD
Address: PO BOX 561008
City-St-Zip: MIAMI, FL 332561008

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

Title: VPDD (X) Change () Addition
Name: DANIELS, DAVID
Address: 7303 BARCOCK BLVD
City-St-Zip: PALM BAY, FL 32909

Title: PD (X) Change () Addition
Name: JENKINS, LARRY
Address: 400 WOODLAWN CEETERY RD.
City-St-Zip: GOTH, FL 34734

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: PHILLIP L COLEMAN

SEC

03/31/2009

Electronic Signature of Signing Officer or Director

Date