2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01799

FILED Feb 25, 2011 Secretary of State

Entity Name: MICANOPY HISTORIC CEMETERY ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

401 W. SMITH ST. P. O. BOX 631 MICANOPY, FL 32667

Current Mailing Address: New Mailing Address:

401 W. SMITH ST. P. O. BOX 631 MICANOPY, FL 32667

FEI Number: 59-2374975 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CARSON ROBERTS

309 WHITING RD.

MICANOPY, FL 32667 US

JENNIFER CIALONA
502 NW EESTAULKEE AVE.
MICANOPY, FL 32667 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: JENNIFER CIALONA 02/25/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: T P

Name: CIALONA, JENNIFER
Address: 502 NW EESTAULKEE AVE
City-St-Zip: MICANOPY, FL 32667

Title: S

 Name:
 PITCHER, MARTHA

 Address:
 14600 NW 100 AVE RD

 City-St-Zip:
 REDDICK, FL 32686

Title:

Name: ELLIS, CHARLES

Address: 2045 WATER CREST DRIVE City-St-Zip: ORANGE PARK, FL 32003

Title:

Name: ALSTON, K CHARLES Address: PO BOX 874 City-St-Zip: OCALA, FL 34478

Title:

 Name:
 BOYER, ED

 Address:
 171 STAR LAKE DR

 City-St-Zip:
 HAWTHORNE, FL 32640

Title: [

Name: WEAVER, MARTHA A Address: 702 NW SEMINARY AVE City-St-Zip: MICANOPY, FL 32667

I hereby 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 all other like empowered.

SIGNATURE: JENNIFER CIALONA T P 02/25/2011