2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003849

FILED Apr 22, 2008 Secretary of State

Entity Name: CHIEFLAND UNITED METHODIST CHURCH CEMETERY CORPORATION

Current Principal Place of Business:			New Prince	New Principal Place of Business:	
	64 TERRACE ND, FL 32644				
Current Mailing Address:			New Maili	New Mailing Address:	
PO BOX 2: CHIEFLAN	5 ND, FL 32644				
FEI Number:	: 43-2010111	FEI Number Applied For ()	FEI Number Not App	licable () Certificate of Status Desired ()	
Name and	l Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
10750 NW	IZABETH A V 788 TERR ND, FL 32626	US			
	e named entity s e of Florida.	ubmits this statement for the pu	rpose of changing i	ts registered office or registered agent, or both,	
SIGNATUF	RE:				
	Electroni	c Signature of Registered Ager	nt	Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	V/D () BURR, ELIZABE 10750 NW 88 TI CHIEFLAND, FL	ERR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P/D () HARDEE, CHRIS 11751 NW NW S CHIEFLAND, FL	60 AVE	Title: Name: Address: City-St-Zip:	P/D (X) Change () Addition HARDEE, CHRIS VP 11751 NW NW 50 AVE CHIEFLAND, FL 32626	
Title: Name: Address: City-St-Zip:	S/T () BURR, DENNIS 10750 NW 88 TI CHIEFLAND, FL	ERR	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () AUSTIN, ROBER 12150 NW 80 A' CHIEFLAND, FL	/ENUE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	V () POLLOCK, EUG 107 SE 4 STREI CHIEFLAND, FL	ĒΤ	Title: Name: Address: City-St-Zip:	V (X) Change () Addition POLLOCK, EUGENE P 107 SE 4 STREET CHIEFLAND, FL 32626	
Oity-Ot-Zip.		Delete	Title:	() Change () Addition	

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: ELIZABETH BURR VP 04/22/2008