## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000005267

FILED Jan 14, 2009 Secretary of State

Entity Name: CHILDREN'S MEMORIAL TREE GARDENS INC.

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

799 HAZEL STREET

KEY LARGO, FL 33037 US

**Current Mailing Address: New Mailing Address:** 

799 HAZEL STREET

KEY LARGO, FL 33037 US

FEI Number: 42-1596098 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:

GELBMAN, HOWARD 799 HAZEL STREET

KEY LARGO, FL 33037 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:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete BEYER, MARILYN BEYER, MARILYN Name: Name: 2020640 OVERSEAS HWY Address: 101640 OVERSEAS HWY Address: City-St-Zip: KEY LARGO, FL 33037 City-St-Zip: KEY LARGO, FL 33037

Title: PD Title: (X) Change ( ) Addition ( ) Delete

Name: EVERSON, KELLIE Name: EVERSON, KELLIE Address: 103 SIOUX ST. Address: 48 HIGH POINT ROAD City-St-Zip: TAVERNIER, FL 33070 City-St-Zip: PLANTATION KEY, FL 33070

Title: VPD () Delete Title: () Change () Addition

GELBMAN, HOWARD Name: Name: Address: 799 HAZEL STREET Address: City-St-Zip: KEY LARGO, FL 33037 City-St-Zip:

( ) Delete Title: Title: BD ( ) Change (X) Addition

MCKENZIE, KAY Name: Name:

Address: Address: 300 OCEAN DRIVE # 20 City-St-Zip: City-St-Zip: KEY LARGO, FL 33037

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: HOWARD GELBMAN **TREA** 01/14/2009