

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 21, 2007 8:00 am
Secretary of State

02-21-2007 90028 023 ****61.25

DOCUMENT # N04000008904

1. Entity Name

INTERNATIONAL ASSOCIATION OF CEMETERY
PRESERVATIONISTS, INC.



Principal Place of Business

1202 DENECEE TERRACE
HOLLY HILL FL 32117

Mailing Address

1202 DENECEE TERRACE
HOLLY HILL FL 32117

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

20-1451654

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SMITH, DORIS
1202 DENECEE TERRACE
HOLLY HILL FL 32117

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Doris E. Smith Doris E. Smith

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-13-07

**FILE NOW: FEE IS \$61.25
Due By May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME SMITH, DORIS E
STREET ADDRESS 1202 DENECEE TERRACE
CITY- ST- ZIP HOLLY HILL FL 32117

TITLE D ☒ Delete
NAME JAMES, KOURTNIE
STREET ADDRESS 1202 DENECEE TERRACE
CITY- ST- ZIP HOLLY HILL FL 32117

TITLE T ☒ Delete
NAME NUNEZ, THOM
STREET ADDRESS 128 EVERGREEN AVE
CITY- ST- ZIP EDGEWATER FL 32132

TITLE S ☐ Delete
NAME OLSON, HEATHER
STREET ADDRESS 329 BRITTANY CIRCLE
CITY- ST- ZIP CASSELBERRY FL 32707

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME Lorraine Farris
STREET ADDRESS 355 Garden St.
CITY- ST- ZIP Deland, FL 32720-1254

TITLE ☐ Change ☒ Addition
NAME Canady, Jimmy
STREET ADDRESS 1931 10th St.
CITY- ST- ZIP Deland, FL 32724

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Doris E. Smith* Doris E. Smith 2-13-07 386-253-6034

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #