

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002072

FILED
Apr 15, 2009
Secretary of State

Entity Name: HOLY CROSS CATHOLIC CEMETERY, INC.

Current Principal Place of Business:

6369 NINTH AVE NORTH
ST PETERSBURG, FL 33713

New Principal Place of Business:

Current Mailing Address:

6369 NINTH AVE NORTH
ST PETERSBURG, FL 33713

New Mailing Address:

FEI Number: 26-2669274

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIVITO, JOSEPH A ESQUIRE
4514 CENTRAL AVE
ST PETERSBURG, FL 33711 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: S () Delete
Name: MORGAN, JOAN
Address: PO BOX 40200
City-St-Zip: ST PETERSBURG, FL 337430200

Title: P () Delete
Name: DEPTULA, ELIZABETH
Address: PO BX 40200
City-St-Zip: ST PETERSBURG, FL 337430200

Title: V () Delete
Name: BALTHAZAR, NORMAN REVMSGR
Address: PO BOX 40200
City-St-Zip: ST PETERSBURG, FL 337430200

Title: T () Delete
Name: WARD, PAUL
Address: PO BOX 40200
City-St-Zip: SAINT PETERSBURG, FL 33743

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: MORRIS, ROBERT REV.
Address: PO BOX 40200
City-St-Zip: ST PETERSBURG, FL 337430200

Title: P (X) Change () Addition
Name: DEPTULA, ELIZABETH
Address: PO BOX 40200
City-St-Zip: ST PETERSBURG, FL 337430200

Title: V (X) Change () Addition
Name: BALTHAZAR, NORMAN MSGR
Address: PO BOX 40200
City-St-Zip: ST PETERSBURG, FL 337430200

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

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: JOSEPH A. DIVITO

RA

04/15/2009

Electronic Signature of Signing Officer or Director

Date