

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002142

FILED  
Jan 14, 2009  
Secretary of State

**Entity Name:** NETTLE RIDGE CEMETARY COMMITTEE, INC.

**Current Principal Place of Business:**

20158 NE JOHN G. BRYANT RD  
BLOUNTSTOWN, FL 32424 US

**New Principal Place of Business:**

**Current Mailing Address:**

20158 NE JOHN G. BRYANT RD  
BLOUNTSTOWN, FL 32424 US

**New Mailing Address:**

**FEI Number:** 11-3780370

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DANIELS, JA JR.  
20158 NE JOHN G. BRYANT RD.  
BLOUNTSTOWN, FL 32424 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: P ( ) Delete  
Name: DANIELS, JA JR.  
Address: 20158 NE JOHN G. BRYANT RD  
City-St-Zip: BLOUNTSTOWN, FL 32424

Title: VP ( ) Delete  
Name: GRIFFIN, PHILLIP W SR.  
Address: 20257 NE BURNS AVE.  
City-St-Zip: BLOUNTSTOWN, FL 32424

Title: VP ( ) Delete  
Name: RICHARDS, CHARLES A  
Address: 18664 NE 69  
City-St-Zip: BLOUNTSTOWN, FL 32424

Title: VP ( ) Delete  
Name: RICHARDS, JOHN T  
Address: 18883 NE ROY GOLDEN RD  
City-St-Zip: BLOUNTSTOWN, FL 32424

Title: VP ( ) Delete  
Name: BARFIELD, JARROD  
Address: 21103 NE MACEDONIA RD.  
City-St-Zip: BLOUNTSTOWN, FL 32424

Title: VP ( ) Delete  
Name: GRIFFIN, PHILLIP  
Address: 20221 NE BURNS AVE.  
City-St-Zip: BLOUNTSTOWN, FL 32424

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

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: J. A. DANIELS, JR.

P

01/14/2009

Electronic Signature of Signing Officer or Director

Date