

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006510

FILED
Aug 25, 2009
Secretary of State

Entity Name: ODDFELLOW CEMETERY, INC.

Current Principal Place of Business:

14236 S.E. 45TH PLACE
STARKE, FL 32091

New Principal Place of Business:

Current Mailing Address:

14236 S.E. 45TH PLACE
STARKE, FL 32091

New Mailing Address:

FEI Number: 30-0321711 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WILLIAMS, DAISY
14236 S.E. 45TH PLACE
STARKE, FL 32091 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:

Title: P () Delete
Name: CHANDLER, RICHARD
Address: 5566 NW 177 STREET
City-St-Zip: STARKE, FL 32091 US

Title: VP () Delete
Name: HUDSON, JOHN H
Address: P.O. BOX 214
City-St-Zip: STARKE, FL 32091 US

Title: S () Delete
Name: WILLIAMS, DAISY
Address: 14236 S.E. 45TH PLACE
City-St-Zip: STARKE, FL 32091

Title: T () Delete
Name: CHANDLER, AMANDA
Address: 4493 S.E. 43RD TERRACE
City-St-Zip: STARKE, FL 32091

Title: RCSC () Delete
Name: FORD, SHIRLEY
Address: 115 HARUTHA STREET
City-St-Zip: STARKE, FL 32091

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: DAISY C. WILLIAMS

SEC

08/25/2009

Electronic Signature of Signing Officer or Director

Date