

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012205

FILED
Jan 09, 2009
Secretary of State

Entity Name: CAMPBELL-HARMONY BAPTIST CEMETERY ASSOCIATION, INC.

Current Principal Place of Business:

389 SW ANDERSON POND WAY
MADISON, FL 32340

New Principal Place of Business:

Current Mailing Address:

389 SW ANDERSON POND WAY
MADISON, FL 32340

New Mailing Address:

FEI Number: 02-0763621

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPBELL, EDWARD
389 SW ANDERSON POND WAY
MADISON, FL 32340 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: D () Delete
Name: CAMPBELL, RICHARD
Address: 585 KINGSWAY RD
City-St-Zip: TALLAHASSEE, FL 32301

Title: D () Delete
Name: SPRADLEY, W J JR
Address: 5354 FIRST FEDERAL RD
City-St-Zip: GREENVILLE, FL 32331

Title: D () Delete
Name: RAU, ROBERT W
Address: 45128 WARRIOR DR
City-St-Zip: CALLAHAN, FL 32011

Title: P () Delete
Name: CAMPBELL, EDWARD
Address: 389 SW ANDERSON POND WAY
City-St-Zip: MADISON, FL 32340

Title: V () Delete
Name: WEBB, AMY
Address: 1755 B POPLAR STREET
City-St-Zip: VALDOSTA, GA 31601

Title: S () Delete
Name: JESONEK, BARBARA
Address: 14059 GROVER ROAD
City-St-Zip: JACKSONVILLE, FL 322261947

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CAMPBELL, RICHARD E
Address: 7788 BRIARCREEK ROAD NORTH
City-St-Zip: TALLAHASSEE, FL 32312

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

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

Title: P (X) Change () Addition
Name: CAMPBELL, EDWARD P
Address: 389 SW ANDERSON POND WAY
City-St-Zip: MADISON, FL 32340

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: EDWARD CAMPBELL

P

01/09/2009

Electronic Signature of Signing Officer or Director

Date