

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002625

FILED  
Feb 26, 2010  
Secretary of State

**Entity Name:** DYKES CEMETERY ASSOCIATION, INC.

**Current Principal Place of Business:**

1847 GULF POWER ROAD  
SNEADS, FL 32460

**New Principal Place of Business:**

**Current Mailing Address:**

2051 RIVER ROAD  
P O BOX 184  
SNEADS, FL 32460

**New Mailing Address:**

**FEI Number:** 77-0672362

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HATCHER, LINDA R  
2051 RIVER RD  
SNEADS, FL 32460 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: PD  
Name: WALDEN, FAYE  
Address: 1847 GULF POWER ROAD  
City-St-Zip: SNEADS, FL 32460

Title: VD  
Name: MCDANIEL, BOBBY C  
Address: WALDEN ROAD  
City-St-Zip: SNEADS, FL 32460

Title: STD  
Name: FORD, EUNICE H  
Address: 7545 HOWELL ROAD  
City-St-Zip: SNEADS, FL 32324

Title: STD  
Name: HATCHER, LINDA  
Address: 2051 RIVER ROAD  
City-St-Zip: SNEADS, FL 32324

Title: D  
Name: HOWELL, CARL G  
Address: 7960 LAKE SEMINOLE ROAD  
City-St-Zip: SNEADS, FL 32324

Title: D  
Name: WILLIAMS, ROBBIE J  
Address: 7470 HOWELL ROAD  
City-St-Zip: SNEADS, FL 32460

I hereby 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 all other like empowered.

SIGNATURE: LINDA HATCHER

STD

02/26/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date