

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006219

FILED  
Apr 01, 2010  
Secretary of State

**Entity Name:** LAUREL GROVE CEMETERY ASSOCIATION, INC.

**Current Principal Place of Business:**

15340 NE 147TH AVE  
WALDO, FL 32694

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 130  
WALDO, FL 32694

**New Mailing Address:**

**FEI Number:** 14-2008669

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DONALDSON, FRED  
14058 NE 138TH STREET  
WALDO, FL 32694 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  
Name: DONALDSON, FRED S  
Address: 14058 NE 138 ST  
City-St-Zip: WALDO, FL 32694

Title: S/T  
Name: DONALDSON, JUDY S  
Address: 14058 NE 138 ST  
City-St-Zip: WALDO, FL 32694

Title: VPD  
Name: SCHENCK, DONALD  
Address: 11906 NE HWY 301  
City-St-Zip: WALDO, FL 32694

Title: D  
Name: GANSTINE, JACK  
Address: 6512 WOODLAND DR  
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: D  
Name: DYSON, RUSS  
Address: 4922 NE 77TH AVE  
City-St-Zip: GAINESVILLE, FL 32607

Title: D  
Name: DUBOIS, JAMES J  
Address: 14946 NE 143RD TERRACE  
City-St-Zip: WALDO, FL 32694

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: FRED S. DONALDSON

P

04/01/2010

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

\_\_\_\_\_  
Date