

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2001 8:00 am
Secretary of State

01-31-2001 90192 034 ***158.75

DOCUMENT # N11000002762

1. Entity Name

ENTERPRISE EVERGREEN CEMETERY, INC.

Principal Place of Business

Mailing Address

190 CLARK STREET
 ENTERPRISE FL 32725

190 CLARK STREET
 ENTERPRISE FL 32725

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1707634

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LONG, WILLIAM T
 145 S HWY 17-92
 DEBARY FL 32713

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	President	<input type="checkbox"/> Delete
NAME	W. T. LONG	
STREET ADDRESS	145 S. HWY 17-92	
CITY-ST-ZIP	DEBARY, FL 32713	
TITLE	Secretary	<input type="checkbox"/> Delete
NAME	F. C. Peterman	
STREET ADDRESS	106 3rd. ST.	
CITY-ST-ZIP	Enterprise FL 32725	
TITLE	Treasurer	<input type="checkbox"/> Delete
NAME	J. W. BRUCE & C. E. BRUCE	
STREET ADDRESS	190 CLARK ST	
CITY-ST-ZIP	Enterprise FL 32725	
TITLE	1-V. President	<input type="checkbox"/> Delete
NAME	W. J. HARDIN	
STREET ADDRESS	P.O. BOX 4222	
CITY-ST-ZIP	Enterprise FL 32725	
TITLE	2-V. President	<input type="checkbox"/> Delete
NAME	MARK PADGETT	
STREET ADDRESS	950 BIRD BAY CT.	
CITY-ST-ZIP	LAKE MARY FL 32746	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Joe W. Bruce
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 JOE W. BRUCE

Date

Daytime Phone #

1-23-01 407-668-6998

CR2E034 (10/00)