

2008 CORPORATION ANNUAL REPORT

**FILED
Apr 03, 2008
Secretary of State**

DOCUMENT# N11000002762

Entity Name: ENTERPRISE EVERGREEN CEMETERY, INC.

Current Principal Place of Business:

1005 ENTERPRISE OSTEEN ROAD
ENTERPRISE, FL 32725

New Principal Place of Business:

Current Mailing Address:

145 SOUTH HWY 17-92
DEBARY, FL 32713

New Mailing Address:

FEI Number: 59-1707634 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LONG, W T
Address: 145 S HWY 17-92
City-St-Zip: DEBARY, FL 32713

Title: S () Delete
Name: PETERMAN, F.C.
Address: 106 3RD. ST.
City-St-Zip: ENTERPRISE, FL 32725

Title: T () Delete
Name: BRUCE, J W
Address: 190 CLARK STREET
City-St-Zip: ENTERPRISE, FL 32725

Title: VP () Delete
Name: HARDIN, W J
Address: P.O. BOX 4222
City-St-Zip: ENTERPRISE, FL 32725

Title: VP () Delete
Name: PADGETT, MARK
Address: 521 RANDON TERRACE
City-St-Zip: LAKE MARY, FL 32746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM T. LONG

P

04/03/2008

Electronic Signature of Signing Officer or Director

_____ Date