

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14922

FILED
Feb 13, 2011
Secretary of State

Entity Name: ROBERTS CEMETERY, INC.

Current Principal Place of Business:

401
WEWAHITCHKA, FL 32465

New Principal Place of Business:

Current Mailing Address:

PO BOX 401
WEWAHITCHKA, FL 32465

New Mailing Address:

FEI Number: 59-2908414

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERTS, DAVID C
190 PET PATCH RD.
WEWAHITCHKA, FL 32465 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: DC
Name: ROBERTS, DAVID
Address: 190 PET PATCH RD.
City-St-Zip: WEWAHITCHKA, FL 32465

Title: D
Name: GRIFFIN, GERALD
Address: P.O. BOX 215 /140 GRIFFIN RD,STONE MILL CR
City-St-Zip: WEWAHITCHKA, FL 32465

Title: D
Name: MCDANIEL, WARD
Address: P.O. BOX 823 /160 MINNIE OLA LN
City-St-Zip: WEWAHITCHKA, FL 32465

Title: DST
Name: BIDWELL, APRIL
Address: 111 FORT PLACE CIRCLE
City-St-Zip: WEWAHITCHKA, FL 32465

Title: D
Name: BIDWELL, DAVID
Address: 180 KYE'S LN.
City-St-Zip: WEWAHITCHKA, FL 32465

Title: D
Name: LESTER, JIMMY
Address: P.O. BOX 413
City-St-Zip: WEWAHITCHKA, FL 32465

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: APRIL BIDWELL

SECR

02/13/2011

Electronic Signature of Signing Officer or Director

Date