

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2006 8:00 am
Secretary of State

01-17-2006 90245 003 ****61.25

DOCUMENT # N16746 1. Entity Name VICKERS CEMETERY, INC.					
Principal Place of Business P.O. BOX 541 HAVANA, FL 32333 US			Mailing Address 1806 SUNSET LANE TALLAHASSEE, FL 32303		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-2712517	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent WARLICK, DONNA 1806 SUNSET LANE TALLAHASSEE, FL 32303				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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. I am familiar with, and accept the obligations of registered agent.				\$8.75 Additional Fee Required	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State		10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
P DURDEN, BOB 4120 FAIRBANKS FERRY RD HAVANA, FL 32333		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
T WARLICK, DONNA 1806 SUNSET LANE TALLAHASSEE, FL 32303		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
S CASSIDY, ANGELA 1806 SUNSET LANE TALLAHASSEE, FL 32303		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
T WALSH, VENICE 221 DOGWOOD CIRCLE HAVANA, FL		D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
S BARBER, ANNETTE 3565 CONCORD ROAD HAVANA, FL 32333		D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
T WALSH, DOUGLAS 1733 BARBER ROAD HAVANA, FL 32333		D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: _____ 1-13-2006 850 576 7145 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					