

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24978

FILED  
Feb 23, 2008  
Secretary of State

**Entity Name:** GLENWOOD CEMETERY ASSOCIATION, INC.

**Current Principal Place of Business:**

3190 GRAND AVENUE  
GLENWOOD, FL 32722

**New Principal Place of Business:**

**Current Mailing Address:**

3190 GRAND AVENUE  
P.O. BOX 220031  
GLENWOOD, FL 32722

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

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

TYSON, CAROLE  
GLENWOOD PRESBYTERIAN CHURCH  
3190 GRAND AVENUE  
GLENWOOD,, FL 32722 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: DS ( ) Delete  
Name: VITA CRAIN,  
Address: 8353 SE 177 BARTRAM LOOP  
City-St-Zip: THE VILLAGES, FL 32162

Title: D ( ) Delete  
Name: ELMER VANCLEEF,  
Address: 731 E OHIO AVE.  
City-St-Zip: DELAND, FL

Title: DVP ( ) Delete  
Name: FULTON, JOYCE  
Address: 504 N KANSAS AVE  
City-St-Zip: DELAND, FL 32724

Title: DC ( ) Delete  
Name: HARRINGTON, DON A.,  
Address: 1102 ROLLING ACRES DR.  
City-St-Zip: GLENWOOD, FL

Title: DT ( ) Delete  
Name: BRUDERICK, DAVID L  
Address: 2939 RUGGLES DRIVE  
City-St-Zip: DELAND, FL 32720

Title: DP ( ) Delete  
Name: JOHNS, WAYNE  
Address: 402 W. MINNESOTA AVE.  
City-St-Zip: DELAND, FL 32720

**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:

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

SIGNATURE: DAVID L BRUDERICK

DT

02/23/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date