2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 19, 2008 8:00 am
Secretary of State
07-22-2008 90006 030 ****70.00

DOCUMENT # N25143

1. Entity Name
LESSIE COMMUNITY CEMETERY ASSOCIATION, INC.

66015995

03132008 Chg-NP CR2E037 (12/06)

Principal Place of Business	Mailing Address
58359 TIMMONS RD HILLIARD, FL 32046 US	58359 TIMMONS RD HILLIARD, FL 32046 US

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
c/o Howard Alderman	58359 Timmons RD.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Hilliard, FL.	City & State: Hilliard, FL.
Zip: 32046 Country: U.S.A.	Zip: 32046 Country:

4. FEI Number: NOT APPLICABLE ☐ 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
ALDERMAN, HOWARD 58359 TIMMONS RD HILLIARD, FL 32046	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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Howard Alderman Howard Alderman 7/18/08
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HOOPER, JACKIE L 152981 COUNTY ROAD 108 YULEE, FL 32097	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T ALBERTIE, THELMA 152974 COUNTY ROAD 108 YULEE, FL 32097	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S ALDERMAN, HOWARD 58359 TIMMONS RD. HILLIARD, FL 32046	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WHITE, AMOS 67828 SANDHILL ROAD YULEE, FL 32097	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ 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: Howard Alderman Howard Alderman 8/13/08
MANDATORY-TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #