

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29163

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: LAKE MARY CEMETERY ASSOCIATION, INC.

**Current Principal Place of Business:**

116 EAST CRYSTAL LAKE AVE  
LAKE MARY, FL 32746

**New Principal Place of Business:**

**Current Mailing Address:**

116 EAST CRYSTAL LAKE AVE  
LAKE MARY, FL 32746

**New Mailing Address:**

FEI Number: 59-1992162

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DURYEA, MARY JANE  
116 EAST CRYSTAL LAKE AVE  
LAKE MARY, FL 32746 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: D ( ) Delete  
Name: SUTTER, SUHER  
Address: 316 EVANS DALE RD  
City-St-Zip: LAKE MARY, FL 32746

Title: D ( ) Delete  
Name: RICE, EVELYN  
Address: 243 N. COUNTRY CLUB DR.  
City-St-Zip: LAKE MARY, FL 32746

Title: D ( ) Delete  
Name: O'CONNOR, CLAIRE E.  
Address: 227 CLERMONT RD.  
City-St-Zip: LAKE MARY, FL 32746

Title: STD ( ) Delete  
Name: DURYEA, MARY JANE  
Address: 235 CLERMONT RD.  
City-St-Zip: LAKE MARY, FL 32746

Title: DP ( ) Delete  
Name: RHODES, CLINTON  
Address: 116 EAST CRYSTAL LAKE AVE  
City-St-Zip: LAKE MARY, FL 32746

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: SUTTER, STEVEN  
Address: 316 EVANS DALE RD  
City-St-Zip: LAKE MARY, FL 32746

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: MARY JANE DURYEA

STD

04/21/2009

Electronic Signature of Signing Officer or Director

Date