

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 01, 2009
Secretary of State**

DOCUMENT# N31720

Entity Name: ANTIOCH CEMETERY MEMORIAL FUND, INC.

Current Principal Place of Business:

C/O TERRY MCDAVID
178 SOUTH HERNANDO STREET
LAKE CITY, FL 32025

New Principal Place of Business:

Current Mailing Address:

C/O TERRY MCDAVID
178 SOUTH HERNANDO STREET
LAKE CITY, FL 32025

New Mailing Address:

FEI Number: 50-0160061 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCDAVID, TERRY
178 SE HERNANDO AVE.
LAKE CITY, FL 32025 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: PD () Delete
Name: CELLON, BILL
Address: P.O. BOX 77
City-St-Zip: LA CROSSE, FL 32658

Title: VD () Delete
Name: COLSON, MARY LOUISE,
Address: PO BOX 177
City-St-Zip: LACROSS, FL 32658

Title: STD () Delete
Name: MCDAVID, HAROLD,
Address: 6119 WEST BLVD
City-St-Zip: MELROSE, FL 32666

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: COLSON, MARY LOUISE
Address: PO BOX 177
City-St-Zip: LACROSSE, FL 32658

Title: STD (X) Change () Addition
Name: MCDAVID, HAROLD
Address: 6119 WEST BLVD
City-St-Zip: MELROSE, FL 32666

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 L. COLSON, SECRETARY/TREASURER

VD

02/01/2009

Electronic Signature of Signing Officer or Director

_____ Date