

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33932

FILED
Jan 14, 2009
Secretary of State

Entity Name: THE KINSEY CEMETERY FUND, INC.

Current Principal Place of Business:

600 MANANA RANCH RD.
MONTICELLO, FL 32344

New Principal Place of Business:

Current Mailing Address:

600 MANANA RANCH RD.
MONTICELLO, FL 32344

New Mailing Address:

FEI Number: 59-2966531

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COOK, MARGIE H
600 MANANA RANCH ROAD
MONTICELLO, FL 32344 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: COOK, MARGIE H
Address: 600 MANANA ROAD
City-St-Zip: MONTICELLO, FL 32344

Title: T () Delete
Name: SWICKLEY, EVELYN
Address: 478 MANANA RANCH ROAD
City-St-Zip: MONTICELLO, FL 32344

Title: T () Delete
Name: HATFIELD, ROBERT
Address: 3224 BODMIN DR.
City-St-Zip: TALLAHASSEE, FL 32317

Title: T () Delete
Name: CLARK, AMANDA
Address: 3502 AUCILLA ROAD
City-St-Zip: MONTICELLO, FL 32344

Title: T () Delete
Name: HATFIELD, WILLIAM
Address: 709 WHIPPERWILL RD.
City-St-Zip: MONTICELLO, FL 32342

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:

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: MARGIE COOK

D

01/14/2009

Electronic Signature of Signing Officer or Director

Date