

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 09, 2004 8:00 am
Secretary of State

04-09-2004 90061 043 ****61.25

DOCUMENT # N38439

1. Entity Name

THE CRAIN CEMETERY ASSOCIATION, INC.



Principal Place of Business

7050 SHERMAN STREET
MILTON FL 32570
US

Mailing Address

7050 SHERMAN STREET
MILTON FL 32570
US

2. Principal Place of Business

6561 Winston Brown Rd
Suite, Apt. #, etc.

3. Mailing Address

6561 Winston Brown Rd
Suite, Apt. #, etc.

City & State

Milton FL

City & State

Milton FL

4. FEI Number

59-3015638

Applied For

Not Applicable

Zip

32570

Country

U.S.A.

Zip

32570

Country

U.S.A.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MILLER, JEANNETTE
6561 WINSTON BROWN RD.
MILTON FL 32570

7. Name and Address of New Registered Agent

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 *Jeannette Miller*
Signature, typed or printed name of registered agent and title if applicable.

JEANNETTE MILLER
(NOTE: Registered Agent signature required when reinstating)

26 March 2004
DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

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

TITLE P
NAME MILLER, JEANNETTE ☐ Delete
STREET ADDRESS 6561 WINSTON BROWN RD.
CITY-ST-ZIP MILTON FL 32570

TITLE V
NAME BROWN, BILLY ☐ Delete
STREET ADDRESS RT 6 BOX 184
CITY-ST-ZIP MILTON FL 32583

TITLE ST
NAME HOBBS, SARAH ☐ Delete
STREET ADDRESS 7300 JOHNSON RD.
CITY-ST-ZIP MILTON FL 32583

TITLE T
NAME HINOTE, LLOYD ☒ Delete
STREET ADDRESS 907 N. ALABAMA STREET
CITY-ST-ZIP MILTON FL 32670

TITLE T
NAME SMITH, DEBRA ☐ Delete
STREET ADDRESS 7763 PARKER RD.
CITY-ST-ZIP MILTON FL 32570

TITLE T
NAME HENDERSON, VASHTI ☐ Delete
STREET ADDRESS 104 OLIVER STREET
CITY-ST-ZIP MILTON FL 32570

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☒ Change ☐ Addition
NAME DAUGHTERY, HOWARD
STREET ADDRESS 7988 Malone RD
CITY-ST-ZIP Milton, FL 32570

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Jeannette Miller* JEANNETTE MILLER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

26 March 2004 850-626-1467
Date Daytime Phone #