

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43476

FILED
Apr 28, 2009
Secretary of State

Entity Name: PINE GROVE METHODIST CHURCH CEMETERY, INC.

Current Principal Place of Business:

4521 NE 112TH AVE
SILVER SPRINGS, FL 34488

New Principal Place of Business:

Current Mailing Address:

4521 NE 112TH AVE
SILVER SPRINGS, FL 34488

New Mailing Address:

FEI Number: 59-3071464

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARMER, CAROLINE W
4521 NE 112TH AVE.
SILVER SPRINGS, FL 34488 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: GRANT, RONALD
Address: 4465 NE 112TH AVE.
City-St-Zip: SILVER SPRINGS, FL 34488

Title: D () Delete
Name: WALKUP, KATHLEEN
Address: 4608 AVE G & 8TH ST.
City-St-Zip: MCINTOSH, FL

Title: P () Delete
Name: FARMER, CAROLINE W
Address: 4521 NE 112TH AVE
City-St-Zip: SILVER SPRINGS, FL 34488

Title: D () Delete
Name: RANDALL, BOBBY
Address: 14330 NE 9TH LN
City-St-Zip: SILVER SPRINGS, FL 34488

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GRANT, RONALD
Address: 4465 NE 112TH AVE.
City-St-Zip: SILVER SPRINGS, FL 34488

Title: D (X) Change () Addition
Name: WALKUP, KATHLEEN
Address: 4608 AVE G & 8TH ST.
City-St-Zip: MCINTOSH, FL

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: CAROLINE W. FARMER

P

04/28/2009

Electronic Signature of Signing Officer or Director

Date