

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

FILED
Apr 29, 2004 8:00 am
Secretary of State

04-29-2004 90304 033 ****61.25

DOCUMENT # N44169

1. Entity Name

PINE LEVEL CAMPGROUND CEMETERY, INC.



Principal Place of Business

2163 NW BARROW AVE.
ARCADIA FL 34266-5457
US

Mailing Address

2163 NW BARROW AVE.
ARCADIA FL 34266-5459
US

2. Principal Place of Business

8905 SW RABBIT TRAIL
Suite, Apt. #, etc.

3. Mailing Address

8905 SW RABBIT TRAIL
Suite, Apt. #, etc.



MOORE CR2E037 (11/03)

City & State

ARCADIA, FL

City & State

ARCADIA, FL

4. FEI Number

65-0278994

Applied For

Not Applicable

Zip

34266

Country

US

Zip

34266

Country

US

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BROWN, FLETCHER
124 N BREVARD AVE
ARCADIA FL 33821

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

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

(NOTE: Registered Agent signature required when reinstating)

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 PD
NAME HARRISON, GRADY
STREET ADDRESS 6607 NW OAK HILL AVE.
CITY-ST-ZIP ARCADIA FL 34266 ☒ Delete

TITLE STD
NAME HOLLINGSWORTH, ETHEL R.
STREET ADDRESS 2163 NW BARROW AVE.
CITY-ST-ZIP ARCADIA FL 34266 ☒ Delete

TITLE D
NAME FASSBACH, MARIAN
STREET ADDRESS 7711 SW ALBRITTON ST
CITY-ST-ZIP ARCADIA FL 34266 ☐ Delete

TITLE VD
NAME BEVIS, WILLIAM
STREET ADDRESS 2644 NW TOM MIZELL AVE
CITY-ST-ZIP ARCADIA FL 34266 ☒ Delete

TITLE D
NAME ALTMAN, WILLIAM
STREET ADDRESS 1153 SW SKATES ST
CITY-ST-ZIP ARCADIA FL 34266 ☒ Delete

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Change ☐ Addition
NAME BEVIS, WILLIAM
STREET ADDRESS 2644 NW TOM MIZELL AVE.
CITY-ST-ZIP ARCADIA, FL 34266

TITLE STD ☒ Change ☐ Addition
NAME States, Lynn
STREET ADDRESS 8905 SW RABBIT TRAIL
CITY-ST-ZIP ARCADIA, FL 34266

TITLE VD ☒ Change ☐ Addition
NAME ALTMAN, WILLIAM
STREET ADDRESS 1153 SW SKATES ST.
CITY-ST-ZIP ARCADIA, FL 34266

TITLE D ☐ Change ☐ Addition
NAME HOLLINGSWORTH, ETHEL
STREET ADDRESS 2163 NW BARROW AVE.
CITY-ST-ZIP ARCADIA, FL 34266

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:

Lynn States

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/04

Date

Daytime Phone #