

# 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N44169

1. Entity Name  
PINE LEVEL CAMPGROUND CEMETERY, INC.



Principal Place of Business  
3905 SW RABBIT TRAIL  
ARCADIA, FL 34266 US

Mailing Address  
3905 SW RABBIT TRAIL  
ARCADIA, FL 34266 US

2. Principal Place of Business

8905 SW Rabbit Trail  
Suite, Apt. #, etc.

3. Mailing Address

8905 SW Rabbit Trail  
Suite, Apt. #, etc.

City & State  
Arcadia, FL

Zip  
34266

Country  
US

City & State  
Arcadia, FL

Zip  
34266

Country  
US



REINSTATEMENT

4. FEI Number  
65-0278994

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BROWN, FLETCHER Eugene E. Waldron Jr  
124 N BREVARD AVE  
ARCADIA, FL 33821

7. Name and Address of New Registered Agent

Name Eugene E. Waldron Jr.

Street Address (P.O. Box Number is Not Acceptable)

124 N. Brevard Ave.

City Arcadia

FL

Zip Code  
34266

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

Eugene E. Waldron Jr.

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

(NOTE: Registered Agent signature required when reinstating)

3/14/06

DATE

FILE NOW!!! FEE IS \$122.50

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Make check payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE STD ☐ Delete  
NAME STATES, LYNN  
STREET ADDRESS 8905 SW RABBIT TRAIL  
CITY-ST-ZIP ARCADIA, FL 34266

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

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

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

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Director ☐ Change ☒ Addition  
NAME Sharon Shatney  
STREET ADDRESS 2693 NW Pine Creek Ave.  
CITY-ST-ZIP Arcadia, FL 34266

TITLE Vice President ☐ Change ☒ Addition  
NAME Cecil Altman  
STREET ADDRESS 4216 SW Langford St.  
CITY-ST-ZIP Arcadia, FL 34266

TITLE ☐ Change ☐ Addition  
NAME 800071649008  
STREET ADDRESS 04/24/06--01070--012 \*\*122.50  
CITY-ST-ZIP

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

3/14/06

(863) 993-0892

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

K. Eckel MAR 28 2006