

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45212

FILED
Mar 21, 2006
Secretary of State

Entity Name: LAUREL HILL CEMETERY ASSOCIATION, INC.

Current Principal Place of Business:

2615 NW 5TH PLACE
GAINESVILLE, FL 32607 US

New Principal Place of Business:

Current Mailing Address:

2615 NW 5TH PLACE
GAINESVILLE, FL 32607 US

New Mailing Address:

FEI Number: 65-0284330

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AILSTOCK, JANET P
2615 NW 5 PLACE
GAINESVILLE, FL 32607 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: WEST, MARCIA
Address: 305 E CHURCH ST
City-St-Zip: ARCHER, FL 32618

Title: D () Delete
Name: GREEN, ANN B
Address: 202 PEACHTREE ST
City-St-Zip: ARCHER, FL 32618

Title: VD () Delete
Name: MORPER, MILTON C. JR.,
Address: 1396 PALM CIRCLE
City-St-Zip: LAKE CITY, FL

Title: D () Delete
Name: AILSTOCK, JANET P
Address: 2615 NW 5 PLACE
City-St-Zip: GAINESVILLE, FL 32607

Title: D () Delete
Name: COPELAND, THOMAS
Address: 12925 SW 154TH ST.
City-St-Zip: ARCHER, FL

Title: D () Delete
Name: WALTON, PEYTON
Address: 801 EAST HIGH STREET
City-St-Zip: ARCHER, FL 32618

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:

Title: PRES (X) Change () Addition
Name: COOPER, TAMMY
Address: 11701 SW ARCHER RD.
City-St-Zip: GAINESVILLE, FL 32608

I hereby certify that the information supplied with this filing does not qualify for the 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: JANET P. AILSTOCK

DIRE

03/21/2006

Electronic Signature of Signing Officer or Director

Date