2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51430

FILED Mar 04, 2010 Secretary of State

Entity Name: PONCEANNAH CEMETERY ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

43736 S. ISLAND DR. PAISLEY, FL 32767 US

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 4 PAISLEY, FL 32767

FEI Number: 59-3161906 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FOSTER, ELIZABETH 4630 NW 79TH AVE APT 1-A MIAMI, FL 33166 US

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.

III the State of Florida

SIGNATURE: Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PT

Name: CROW, DAVID
Address: 5984 BARMA AVE
City-St-Zip: TITUSVILLE, FL 32780

Title: TST

Name: LAPPE, LILLIAN Address: P.O. BOX 4 N/A City-St-Zip: PAISLEY, FL

Title:

Name: LOCKE, CHARLES C Address: 11408 BOB WHITE BLVD

City-St-Zip: LEESBURG, FL

Title:

Name: KNIGHT, ROBERT Address: 431 N. BLUE LAKE AVE.

City-St-Zip: DELAND, FL

Title: VPT

 Name:
 HAYS, MARY

 Address:
 P.O. BOX 41

 City-St-Zip:
 PAISLEY, FL 32767

Title:

Name: HATFIELD, SHARON Address: P.O. BOX 443 N/A City-St-Zip: UMATILLA, FL

I hereby 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 all other like empowered.

SIGNATURE: LILLIAN LAPPE TST 03/04/2010