

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003697

FILED
Jan 07, 2009
Secretary of State

Entity Name: LINDEN CEMETERY ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 1234
BUSHNELL, FL 33513

New Principal Place of Business:

902 E HWY 476
BUSHNELL, FL 33513

Current Mailing Address:

P.O. BOX 1234
BUSHNELL, FL 33513

New Mailing Address:

FEI Number: 59-3220894

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIDEONS, TERRY
902 E HWY 476
BUSHNELL, FL 33513 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: TD () Delete
Name: GIDEONS, TERRY,
Address: 902 E HWY 476
City-St-Zip: BUSHNELL, FL

Title: PD () Delete
Name: AKINS, DALE
Address: P.O BOX 1017 N/A
City-St-Zip: WEBSTER, FL 33597

Title: SD () Delete
Name: CARUSLE, BILLY
Address: 14390 MONTEVISTA RD
City-St-Zip: GROVELAND, FL 34736

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:

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: TERRY GIDEONS

TREA

01/07/2009

Electronic Signature of Signing Officer or Director

Date