

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Mar 04, 2008 08:00 AM
Secretary of State

DOCUMENT # N94000002999

1. Entity Name
CANDLER CEMETERY, INC.



Principal Place of Business
10551 SE 110TH ST RD
CANDLER, FL 32111

Mailing Address
2215 SE FT KING ST
STE B
OCALA, FL 34471 US



02042008 No Chg-NP

CR2E037 (4/06)

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4. FEI Number
59-3407085

Applied For
Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DEAN, SARAH T
1052 SE 95TH TERR
BELLEVIEW, FL 34420

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IN THIS SPACE**

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

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

U00000047488
03/19/08-80022-001 70.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
TOWNLEY, WILLIAM
10551 SE 110TH ST RD
CANDLER, FL 32111

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
STD
DEAN, SARAH T.
10551 SE 110TH ST RD
CANDLER, FL 32111

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
DEAN, H. EDWARD
10551 SE 110TH ST RD
CANDLER, FL 32111

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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: Sarah T. Dean

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(352) 687-3001