

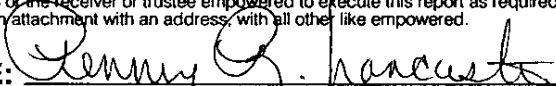


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 24, 2008 8:00 am**  
**Secretary of State**

04-24-2008 90093 004 \*\*\*\*61.25

<b>DOCUMENT # N94000004503</b> 1. Entity Name <b>BAY HILL CEMETERY, INC.</b>					
Principal Place of Business <b>1157 COUNTY ROAD 602 BUSHNELL, FL 33513</b>			Mailing Address <b>PO BOX 1294 BUSHNELL, FL 33513 US</b>		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country			
04202008 Chg-NP CR2E037 (12/06)				4. FEI Number <b>59-3313377</b>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For Not Applicable	
<b>6. Name and Address of Current Registered Agent</b> <b>LANCASTER, PENNY R 1157 COUNTY ROAD 602 BUSHNELL, FL 33513</b>			<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		<b>Make check payable to Florida Department of State</b>	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>BRANCH, JIMMIE L</b> <b>4045 CR 624</b> <b>BUSHNELL, FL</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>LANCASTER, PENNY R</b> <b>1157 COUNTY ROAD 602</b> <b>BUSHNELL, FL 33513</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>LANCASTER, PENNY R</b> <b>1157 COUNTY ROAD 602</b> <b>BUSHNELL, FL 33513</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>BAKER, WILLIAM D</b> <b>510 W. PALM AVENUE</b> <b>BUSHNELL, FL 33513</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Mullins, Mark</b> <b>4489 CR 575</b> <b>Bushnell, FL 33513</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>PARKER, WAYNE</b> <b>4385 SW 81ST ST</b> <b>BUSHNELL, FL</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>WOODWARD, ROBERT</b> <b>510 W PALM AVE</b> <b>BUSHNELL, FL 33513</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Woodard Robert</b> <b>510 W. Palm Ave</b> <b>Bushnell, FL 33513</b>	
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.					
<b>SIGNATURE:</b> 			Date: <b>4/21/08</b>		Daytime Phone #: <b>352-689-3174</b>

ATTACHMENT

40079078

#N94000004503

BAY HILL CEMETERY, INC.  
P.O. BOX 1294  
BUSHNELL, FL 33513

April 21, 2008

Florida Department of State  
Division of Corporations  
P. O. Box 1500  
Tallahassee, FL 32302-1500

Re: 2008 Not-For-Profit Corporation Annual Report

Dear Sir or Madam:

Please find attached our 2008 Not-For-Profit Corporation Annual Report for the Bay Hill Cemetery, Inc., along with our check #503 in the amount of \$61.25. We made several changes and list them below as follows:

President  
Jimmie L. Branch  
4045 CR 624  
Bushnell, FL 33513

Vice-President  
Mark Mullins  
4489 CR 575  
Bushnell, FL 33513

Secretary-Treasurer  
Penny Lancaster  
1157 CR 602  
Bushnell, FL 33513

Director  
John Weldon  
P. O. Box 679  
Micanopy, FL 32667

Director  
Robert Woodard  
510 W. Palm Avenue  
Bushnell, FL 33513

Director  
Alice Lovett  
P. O. Box 211  
Bushnell, FL 33513

Director  
Cynthia Locklear  
4101 CR 624  
Bushnell, FL 33513

Director  
David Caldwell  
P. O. Box 592  
Floral City, FL 34436-0592

Director  
Judy Woodard  
950 CR 482A  
Lake Panasoffkee, FL 33538

Director  
Wayne Parker  
4385 SW 81<sup>st</sup> Street  
Bushnell, FL 33513

# ATTACHMENT

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State of Florida  
Department of State  
April 21, 2008  
Page 2

Director  
Donnie Wayne Woodard  
6717 CR 651  
Bushnell, FL 33513

Director  
Cindy Lake  
P. O. Box 419  
Mineola, FL 34755

Should you have any questions or need additional information, please do not hesitate to contact me at 352-689-3174. Thank you in advance for your assistance in this matter.

Sincerely,



Penny R. Lancaster  
Secretary-Treasurer  
Bay Hill Cemetery, Inc.