2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N95000000088

1. Entity Name
SEVILLE CEMETERY ASSOCIATION, INC.

FILED

2007 NOV 15 PM 3:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
CEMETERY RD & CHURCH ST SEVILLE, FL 32190	P O BOX 473 SEVILLE, FL 32190

10252007 REIN-NP CR2E099 (1/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1835942 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PURVIS, JAMES E 600 PURVIS RD SEVILLE, FL 32190	Name John P. Cade Street Address (P.O. Box Number is Not Acceptable) 2145 McBride Rd, P.O. Box 218 City Seville **FL** Zip Code 32190

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 John P. Cade, John P. Cade, Chairman/Director 11-11-07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $61.25
After January 1, 2008, Fee will be $122.50

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BOLIN, JUNIUS T 2067 LAKE JUANITA ROAD (P.O. BOX 37) SEVILLE, FL 32190	☒ Delete	TITLE S/T/D NAME STREET ADDRESS CITY-ST-ZIP	Louise N. Everett 160 Little Brown Church Rd P.O. Box 98 Seville, FL 32190	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/C CADE, JOHN P 2145 MCBRIDE ROAD (P.O. BOX 218) SEVILLE, FL 32190	☐ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	Norma Braddock 446 County Road 305 P.O. Box 262 Seville, FL 32190	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D REGISTER, JAMES W JR 195 REGISTER LANE (P.O. BOX 397) SEVILLE, FL 32190	☐ Delete	TITLE C/D NAME STREET ADDRESS CITY-ST-ZIP	John P. Cade 2145 Mc Bride Rd (P.O. Box 218) Seville, FL 32190	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	400112351464 11/16/07--01004--003 **61.25	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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: John P. Cade, John P. Cade, Chairman/Director 11/20 aw