2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001232

FILED Mar 24, 2009 Secretary of State

Entity Name: ORIGINAL PALLBEARERS DISTRICT #1, INC.

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

CR 136 1425 E. DUVAL STREET LIVE OAK, FL LIVE OAK, FL 32064 US

Current Mailing Address: New Mailing Address:

2890 145TH ROAD LIVE OAK, FL 32060233 US

FEI Number: 99-3472526 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BROWN, DORE D 2890 145TH RD LIVE OAK, FL 32060 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.

SIGNATURE:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: D () Delete Title: D (X) Change () Addition

 Name:
 ELLIS, CARBIE
 Name:
 ELLIS, CARBIE

 Address:
 4600 89TH ROAD
 Address:
 4600 89TH ROAD

 City-St-Zip:
 LIVE OAK, FL
 32060 US

Title: D () Delete Title: () Change () Addition

 Name:
 MARTIN, ROSA L
 Name:

 Address:
 211 TAYLOR AVE.
 Address:

 City-St-Zip:
 LIVE OAK, FL 32060
 City-St-Zip:

Title: D () Delete Title: D (X) Change () Addition Name: ELLIS, SUSIE D (X) Change () Addition

Title: D () Delete Title: D (X) Change () Addition

 Name:
 BROWN, DORE
 Name:
 BROWN, DORE

 Address:
 2890 145TH ROAD
 Address:
 2890 145TH ROAD

 City-St-Zip:
 LIVE OAK, FL
 City-St-Zip:
 LIVE OAK, FL 32060 US

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: DORE D. BROWN PRES 03/24/2009