2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2011
Secretary of State

DOCUMENT# N95000004938

Entity Name: CRESCENT CITY CEMETERY ASSOCIATION, INC.

Current Principal Place of Business:

402 CYPRESS AVENUE
CRESCENT CITY, FL 32112

New Principal Place of Business:

Current Mailing Address:

PO BOX 968
CRESCENT CITY, FL 32112 US

New Mailing Address:

FEI Number: 59-2336300 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KENNETH, BIGGS
402 CYPRESS AVENUE
CRESCENT CITY, FL 32112 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: PD
Name: GAUTIER, GREG C
Address: 600 CHERRY ST
City-St-Zip: CRESCENT CITY, FL 32112

Title: SD
Name: NELSON, MARGARY N
Address: P.O. BOX 352 N/A
City-St-Zip: CRESCENT CITY, FL 32112

Title: TD
Name: NEWBOLD, JOHN R III
Address: 610 OLD HWY 17
City-St-Zip: CRESCENT CITY, FL 32112

Title: D
Name: LANGSTON, CECILE
Address: PO BOX 407
City-St-Zip: CRESCENT CITY, FL 32112

Title: D
Name: FRANK, CLAYTON A
Address: PO BOX 674
City-St-Zip: CRESCENT CITY, FL 32112

Title: D
Name: GAUTIER, JENNIFER M
Address: P O BOX 67 N/A
City-St-Zip: CRESCENT CITY, FL

I hereby 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 all other like empowered.

SIGNATURE: JOHN R. NEWBOLD III T,D 01/05/2011

Electronic Signature of Signing Officer or Director Date