

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005175

FILED
Jul 17, 2008
Secretary of State

Entity Name: PLUMMER'S COVE CEMETERY, INC.

Current Principal Place of Business:

5039 DIXIE LANDING DRIVE
JACKSONVILLE, FL 32224

New Principal Place of Business:

Current Mailing Address:

5039 DIXIE LANDING DRIVE
JACKSONVILLE, FL 32224

New Mailing Address:

FEI Number: 59-3349488 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MACLEAN, MARK B
2033 FLESHER AVENUE
JACKSONVILLE, FL 32207 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:

Title: CT () Delete
Name: DIXON, JUANITA P
Address: 5039 DIXIE LANDING DRIVE
City-St-Zip: JACKSONVILLE, FL 322241861

Title: ST (X) Delete
Name: REHBERG, BONNIJAGN P
Address: 7628 TIMBERWOOD DRIVE
City-St-Zip: JACKSONVILLE, FL 32256

Title: TTEE () Delete
Name: MACLEAN, MARK
Address: 1710 MORO STREET
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TTE (X) Change () Addition
Name: DIXON, JUANITA P
Address: 5039 DIXIE LANDING DRIVE
City-St-Zip: JACKSONVILLE, FL 322241861

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TTE (X) Change () Addition
Name: MACLEAN, MARK
Address: 2033 FLESHER AVENUE
City-St-Zip: JACKSONVILLE, FL 32207

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: MARK B. MACLEAN

TTE

07/17/2008

Electronic Signature of Signing Officer or Director

Date