

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005484

FILED
Jan 29, 2009
Secretary of State

Entity Name: ST. JOHN'S CEMETERY INC.

Current Principal Place of Business:

301 NORTH G STREET
PENSACOLA, FL 32501

New Principal Place of Business:

Current Mailing Address:

301 NORTH G STREET
PENSACOLA, FL 32501

New Mailing Address:

FEI Number: 59-0432545

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARYGARDEN, LOUIS A JR.
10100 HILLVIEW DRIVE
APT 1304
PENSACOLA, FL 32514 US

Name and Address of New Registered Agent:

MAYGARDEN, LOUIS A JR.
10100 HILLVIEW DRIVE
APT 1304
PENSACOLA, FL 32514 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: LOUIS A. MAYGARDEN JR

01/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: BRAY, HERMAN K
Address: 2840 VALKYRY WAY
City-St-Zip: CANTONMENT, FL 32533

Title: PD () Delete
Name: GREEN, CHARLES
Address: 4560 TERRASANTA
City-St-Zip: PENSACOLA, FL 32504

Title: STD () Delete
Name: STEVENSON, ERIC D
Address: 6412 BEAUCLAIR DRIVE
City-St-Zip: PENSACOLA, FL 32504

Title: D () Delete
Name: CREEL, L. E.
Address: 10100 HILLVIEW DRIVE
City-St-Zip: PENSACOLA, FL 325145486

Title: D () Delete
Name: MAYGARDEN, LOUIS A
Address: 10100 HILLVIEW DRIVE
City-St-Zip: PENSACOLA, FL 325145486

Title: D () Delete
Name: SPEED, JAMES H
Address: 2715 HEYWARD DRIVE
City-St-Zip: PENSACOLA, FL 32503

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: HERMAN K. BRAY

VP

01/29/2009

Electronic Signature of Signing Officer or Director

Date