

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006536

FILED
Jan 08, 2007
Secretary of State

Entity Name: WOODLAWN CEMETERY, INC.

Current Principal Place of Business:

1/4 OF MILE SOUTH OF I-10
MACCLENNEY, FL 32063

New Principal Place of Business:

Current Mailing Address:

PO BOX 1173
MACCLENNEY, FL 32063 US

New Mailing Address:

FEI Number: 59-0739796

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUERRY, WILLIAM L
420 E MACCLENNEY AVE
MACCLENNEY, FL 32063 US

Name and Address of New Registered Agent:

KNABB, TODD
7436 WOODLAWN ROAD
MACCLENNEY, FL 32063 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: TODD KNABB

01/08/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: GUERRY, WILLIAM L
Address: 420 E MACCLENNEY AVE
City-St-Zip: MACCLENNEY, FL 32063

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KNABB, TODD
Address: 7436 WOODLAWN ROAD
City-St-Zip: MACCLENNEY, FL 32063

Title: VP () Change (X) Addition
Name: GERSON, ANITA G
Address: 152 SOUTH COLLEGE STRET
City-St-Zip: MACCLENNEY, FL 32063

Title: S () Change (X) Addition
Name: KNABB, LISA
Address: 7436 WOODLAWN ROAD
City-St-Zip: MACCLENNEY, FL 32063

Title: T () Change (X) Addition
Name: BAILES, ANDY
Address: P.O. BOX 99
City-St-Zip: GLEN ST. MARY, FL 32040

I hereby certify that the information supplied with this filing does not qualify for the 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: TODD KNABB

P

01/08/2007

Electronic Signature of Signing Officer or Director

Date