2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2009
Secretary of State

DOCUMENT# N98000005674

Entity Name: CHARLES A. WHITEACRE MEMORIAL INC.

Current Principal Place of Business:

23498 N.E. HWY 314
SALT SPRINGS, FL 32134

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5154
SALT SPRINGS, FL 32134

New Mailing Address:

FEI Number: 23-7194057 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CRAWFORD, JOANNE
24830 N.E. 136TH LANE
SALT SPRINGS, FL 32134 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: SVD ( ) Delete
Name: BEELER, JEANETTE F
Address: 15135 NE 242ND AVE
City-St-Zip: FORT MC COY, FL 32134

Title: T ( ) Delete
Name: CRAWFORD, JOANNE
Address: 24830 N.E. 136TH LANE
City-St-Zip: SALT SPRINGS, FL 32134

Title: P ( ) Delete
Name: BEILSTEIN, LORETTA
Address: 8465 NE 310TH AVE
City-St-Zip: SALT SPRINGS, FL 32134

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:

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: JOANNE CRAWFORD T 02/11/2009

Electronic Signature of Signing Officer or Director — Date