

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000768

FILED
Mar 01, 2010
Secretary of State

Entity Name: WHITE CITY CEMETERY ASSOCIATION, INC.

Current Principal Place of Business:

3800 SUNRISE BLVD.
FORT PIERCE, FL 34982

New Principal Place of Business:

Current Mailing Address:

3800 SUNRISE BLVD.
FORT PIERCE, FL 34982

New Mailing Address:

FEI Number: 59-2753972

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAUGHTON, MARY
3800 SUNRISE BLVD.
FORT PIERCE, FL 34982 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: S
Name: GOODMAN, ARLENE
Address: 4410 ARECA PALM DR.
City-St-Zip: FORT PIERCE, FL 34982

Title: T
Name: BUSH, BARBARA E
Address: 247 MANOR DRIVE
City-St-Zip: STUART, FL 34994

Title: P
Name: LAUGHTON, MARY E
Address: 1811 44TH AVENUE
City-St-Zip: VERO BEACH, FL 32966

Title: D
Name: OWENS, BETTY
Address: 1012 NEBRASKA AVE.
City-St-Zip: FORT PIERCE, FL 34950

Title: D
Name: NELSON, DAN
Address: 5120 OLEANDER AVE
City-St-Zip: FORT PIERCE, FL 34982

Title: VP
Name: EDWARDS, ALAN
Address: 5102 INDIAN BEND LANE
City-St-Zip: FORT PIERCE, FL 34951

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: MARY LAUGHTON

PRES

03/01/2010

Electronic Signature of Signing Officer or Director

Date