2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2009
Secretary of State

DOCUMENT# N99000000994

Entity Name: POPE CEMETERY ASSOCIATION INCORPORATED

Current Principal Place of Business:

CEMETERY ST.
SNEADS, FL 32460

New Principal Place of Business:

Current Mailing Address:

PO BOX 33
SNEADS, FL 32460

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LANIER, JUDY
7811 KEEVERS RD
SNEADS, FL 32460 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: PD ( ) Delete
Name: KILPATRICK, DILLON
Address: 2250 KILPATRICK LANE
City-St-Zip: SNEADS, FL 32460

Title: VP/D ( ) Delete
Name: KILPATRICK, DILLON
Address: 2250 KILPATRICK LANE
City-St-Zip: SNEADS, FL 32460

Title: VP ( ) Delete
Name: PRINGLE, SHERRY
Address: 1959 GLOSTER AVE
City-St-Zip: SNEADS, FL 32460

Title: STTT ( ) Delete
Name: LANIER, JUDY
Address: 7811 KEEVERS RD
City-St-Zip: SNEADS, FL 32460

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:

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: JUDY LANIER MS. 01/30/2009

Electronic Signature of Signing Officer or Director — Date