

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004536

FILED
Feb 14, 2012
Secretary of State

Entity Name: ESPANOLA CEMETERY ASSOCIATION, INC.

Current Principal Place of Business:

CR 205
BUNNELL, FL 32110

New Principal Place of Business:

Current Mailing Address:

C/O CARY D. HOLLAND
52 N. ST. ANDREWS DR.
ORMOND BEACH, FL 32174

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:

HOLLAND, CARY D
52 N. ST. ANDREWS DR.
ORMOND BEACH, FL 321743839 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: D
Name: MERCER, RAY
Address: 410 N. ANDERSON ST.
City-St-Zip: BUNNELL, FL 32110

Title: D
Name: HOLLAND, CARY D
Address: 52 N. ST. ANDREWS DRIVE
City-St-Zip: ORMOND BEACH, FL 32174

Title: D
Name: PONTIUS, LILA
Address: 720 CR 304
City-St-Zip: BUNNELL, FL 32110

Title: D
Name: DEEN, CLAUDE SISCO JR.
Address: 1347 N OCEANSIDE BLVD
City-St-Zip: FLAGLER BEACH, FL 321360637

Title: D
Name: HOLLAND, KENT H
Address: 1078 GEORGE ANDERSON ST
City-St-Zip: ORMOND BEACH, FL 32174

Title: D
Name: EMERY, HOWARD
Address: 3831 OLD DIXIE HWY
City-St-Zip: BUNNELL, FL 32110

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: CARY D. HOLLAND

D

02/14/2012

Electronic Signature of Signing Officer or Director

_____ Date