

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005384

FILED
Mar 22, 2012
Secretary of State

Entity Name: PINE LEVEL CEMETERY ASSOCIATION, INC.

Current Principal Place of Business:

708 N MAIN ST
WILDWOOD, FL 34785

New Principal Place of Business:

Current Mailing Address:

PO BOX 420
WILDWOOD, FL 34785

New Mailing Address:

FEI Number: 59-3600102 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SMITH, GWEN N
708 N MAIN ST
WILDWOOD, FL 34785 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
Name: STRUBINGER, JOE
Address: 13470 CR 103
City-St-Zip: OXFORD, FL 34484

Title: VPD
Name: SHREWSBURY, BRENDA
Address: 4694 NE 135TH AVE
City-St-Zip: OXFORD, FL 34484

Title: SD
Name: HAGE, MICHELLE
Address: 2855 HAWTHORNE AVE
City-St-Zip: ORLANDO, FL 32806

Title: TD
Name: SMITH, GWEN N
Address: 1591 E. CR466
City-St-Zip: OXFORD, FL 34484

Title: D
Name: GWALTNEY, JOE
Address: 10691 SE 58TH AVE
City-St-Zip: BELLEVIEW, FL 34420

Title: D
Name: POWELL, DENNIS
Address: 6135 SE STETSON RD
City-St-Zip: BELLEVIEW, FL 34420

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: GWEN N SMITH

D

03/22/2012

Electronic Signature of Signing Officer or Director

Date