2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N9900005423

1. Entity Name

CENTER HILL CEMETERY, INC.



FILED Mar 07, 2003 8:00 am Secretary of State

03-07-2003 90059 050 ****61.25

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Principal Place of Business 4022 SE 17TH TRAIL TRENTON FL 32693 US		4022 SE	Mailing Address 4022 SE 177H TRAIL TRENTON FL 32693 US				S(8 S S S S S S S S S		4 Mebble Myml a 411			
2. Principal I	Place of Busine	SS	3. Mailin	g Address								
Suite, Apt	t. #. etc.		Suite	e, Apt. #, etc.				_				
								☐ CHECK HERE IF MAKING CHANGES				
City & State			City	City & State			4. FEI Numbe	∍r 59-3607299			pplied For ot Applicable	
Zip Country			Zip	Zip		ntry	5. Certificate	5. Certificate of Status Desired \$8.75 Additional Fee Required				
	6. Name a	nd Address of Curre	ent Registered	Agent			7. Name and	Address of New	Registered A	gent		
		- · ·				Name						
CARLISLE, CASEY A 4022 SE 17TH TRAIL						Street Address (P.O. Box Number is Not Acceptable)						
TRENTO	N FL 32693				-	City				Zip Cod	10	
		•		•		City			FL	Zip Cod	e.	
SIGNATURE		printed area of registered ag	gent and title if applica	able (NOT	E: Registered	Anent signature regu	uired when reinstating)	<i>y</i>	DATE		 	
	FILE NOW:	FEE IS \$61.25		9. Election Car	mpaign Fin	nancing	\$5.00 May B		ake Check			
	FILE NOW:				mpaign Fir Contribution	nancing	\$5.00 May B Added to Fees	Flor	ida Departr	ment of S	State	
10.		FEE IS \$61.25 OFFICERS AND	DIRECTORS	9. Election Car Trust Fund C	mpaign Fir Contribution	nancing	\$5.00 May B Added to Fees		ida Departr ERS AND DIRE	ment of S	State	
10. TITLE NAME STREET ADDRESS	PD CARLISLE, 0 4022 SE 17	OFFICERS AND CASEY A TH TRAIL	DIRECTORS	9. Election Car	mpaign Fin Contribution 11. TITLE NAME	nancing n.	\$5.00 May B Added to Fees	Flor	ida Departr ERS AND DIRE	ment of S	State	
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2. Thereby definiting that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes, Flurther certify that the information indicated on this report or supplemental report is true and accurate and that my 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 (hibrida Statutes) and that my name appears in Block 10 or Block 11 is changed, or on an attachment with an addless, with all other like empowered.

SIGNATURE:

3/5/03 3864621125