

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000000267

FILED
Apr 05, 2009
Secretary of State

Entity Name: CUSTOM COLUMBARIUMS, INC.

Current Principal Place of Business:

808 3RD AVENUE, WEST, NO. 604
BRADENTON, FL 34205

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 810
BRADENTON, FL 34206

New Mailing Address:

FEI Number: 26-1662287 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NEWTON, HARLAN L.
808 3RD AVENUE, WEST, NO. 604
BRADENTON, FL 34205 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NEWTON, HARLAN L.
Address: P.O. BOX 810
City-St-Zip: BRADENTON, FL 34206

Title: D () Delete
Name: NEWTON, HARLAN L SR.
Address: PO BOX 1076
City-St-Zip: STUART, FL 34995

Title: D () Delete
Name: NEWTON, DENNIS J.
Address: PO BOX 1147
City-St-Zip: JENSEN BEACH, FL 34958

Title: PVST () Delete
Name: NEWTON, HARLAN L
Address: P.O. BOX 810
City-St-Zip: BRADENTON, FL 34206

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HARLAN L. NEWTON

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04/05/2009

Electronic Signature of Signing Officer or Director

_____ Date