

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V21269

FILED
Jan 20, 2009
Secretary of State

Entity Name: TRINITY MEMORIAL CEMETERY, INC.

Current Principal Place of Business:

43309 US HWY 19N
TARPON SPRINGS, FL 34689 US

New Principal Place of Business:

43309 U S HIGHWAY 19 N
TARPON SPRINGS, FL 34689 US

Current Mailing Address:

P.O. BOX 1608
TARPON SPRINGS, FL 346881608

New Mailing Address:

P.O. BOX 1608
TARPON SPRINGS, FL 346881608 US

FEI Number: 59-3114540

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRIEDLAND, LEW
43309 U.S. HWY 19 N.
TARPON SPRINGS, FL 34689 US

Name and Address of New Registered Agent:

FRIEDLAND, LEW
43309 U S HIGHWAY 19 N
TARPON SPRINGS, FL 34689 US

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: LEW FRIEDLAND

01/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: ST () Delete
Name: FORD, DAVID
Address: 43309 US HWY 19 N
City-St-Zip: TARPON SPRINGS, FL

Title: PD () Delete
Name: FRIEDLAND, LEW,
Address: 43309 US HWY 19 N
City-St-Zip: TARPON SPRINGS, FL

Title: VD () Delete
Name: MITCHELL, DEWEY,
Address: 43309 US HWY 19 N
City-St-Zip: TARPON SPRINGS, FL

Title: VD () Delete
Name: ALDRIDGE, DAN,
Address: 43309 US HWY 19 N
City-St-Zip: TARPON SPRINGS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ST (X) Change () Addition
Name: FORD, DAVID
Address: 43309 U S HIGHWAY 19 N
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: PD (X) Change () Addition
Name: FRIEDLAND, LEW
Address: 43309 U S HIGHWAY 19 N
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: VD (X) Change () Addition
Name: MITCHELL, DEWEY
Address: 43309 U S HIGHWAY 19 N
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: VD (X) Change () Addition
Name: ALDRIDGE, DANIEL
Address: 43309 U S HIGHWAY 19 N
City-St-Zip: TARPON SPRINGS, FL 34689 US

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: LEW FRIEDLAND

P

01/20/2009

Electronic Signature of Signing Officer or Director

Date