

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702081

Entity Name: CONWAY CEMETERY FOUNDATION INC**Current Principal Place of Business:**3401 S. CONWAY ROAD
ORLANDO
ORLANDO, FL 32812-7601**Current Mailing Address:**3401 S. CONWAY ROAD
ORLANDO
ORLANDO, FL 32812-7601 UN**FEI Number:** 59-0965751**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GIVENS, RANDY L
3725 GATLIN WOODS DR.
ORLANDO
ORLANDO, FL 32812 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**Title VD
Name HUDSON, WAYNE
Address 3556 COUNTRY LAKES DR
City-State-Zip: ORLANDO FL 32812Title TD
Name VOELPEL, JOHN III
Address 3201 BURCHFIELD AVE
City-State-Zip: ORLANDO FL 32812-6804Title PD
Name GIVENS, RANDY L
Address 3725 GATLIN WOODS DR
City-State-Zip: ORLANDO FL 32812Title PD
Name GIVENS, RANDY L
Address 3725 GATLAN WOODS DR
City-State-Zip: ORLANDO FL 32812Title PD
Name GIVENS, RANDY L
Address 3725 GATLIN WOODS DR
City-State-Zip: ORLANDO FL 32812Title PD
Name GIVENS, RANDY L
Address 3725 GATLIN WOODS DR
City-State-Zip: ORLANDO FL 32812

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: RANDY L. GIVENS

PRESIDENT

02/01/2013

Electronic Signature of Signing Officer/Director Detail_____
Date