

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000001217

**Entity Name:** MUTUAL AID FOR BURIAL SOCIETY, INC.

**Current Principal Place of Business:**

919 E. SR 436  
CASSELBERRY, FL 32707

**Current Mailing Address:**

P.O. BOX 677606  
ORLANDO, FL 32867-7606

**FEI Number:** 59-3749221

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

BOTETANO, DORIS E  
2815 UNIVERSITY ACRES DR.  
ORLANDO, FL 32817 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 D  
Name BOTETANO, DORIS E  
Address 2815 UNIVERSITY ACRES DR.  
City-State-Zip: ORLANDO FL 32817

Title D  
Name MEDINA, ELSA Y  
Address 11030 CREIGHTON DRIVE  
City-State-Zip: ORLANDO FL 32817

Title D  
Name ANTRON, BENJAMIN  
Address P.O. BOX 677606  
City-State-Zip: ORLANDO FL 32867-7606

*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:** DORIS BOTETANO

**DIRECTOR AND RA**

**03/01/2016**

Electronic Signature of Signing Officer/Director Detail

Date