

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000006219

**Entity Name:** LAUREL GROVE CEMETERY ASSOCIATION, INC.**Current Principal Place of Business:**15340 NE 147TH AVE  
WALDO, FL 32694**Current Mailing Address:**PO BOX 130  
WALDO, FL 32694**FEI Number:** 14-2008669**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DONALDSON, JUDY  
14058 NE 138TH STREET  
WALDO, FL 32694 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:** JUDY DONALDSON

02/19/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	P/D
Name	DONALDSON, JUDY S
Address	14058 NE 138TH STREET
City-State-Zip:	WALDO FL 32694

Title	S/D
Name	PEARSON, IRENE S
Address	14606 144TH AVE.
City-State-Zip:	WALDO FL 32694

Title	D
Name	GANSTINE, JACK
Address	6512 WOODLAND DR
City-State-Zip:	KEYSTONE HEIGHTS FL 32656

Title	D
Name	PEARSON, TRUMAN
Address	14606 NE 144TH AVE.
City-State-Zip:	WALDO FL 32694

Title	D
Name	DUBOIS, JAMES J
Address	14946 NE 143RD TERRACE
City-State-Zip:	WALDO FL 32694

*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:** JUDY DONALDSON

P/D

02/19/2020

Electronic Signature of Signing Officer/Director Detail

Date