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: DALE E HANSEN

Electronic Signature of Signing Officer/Director Detail

## **Current Principal Place of Business: 130 ENTERPRISE ROAD**

ENTERPRISE, FL 32725

## **Current Mailing Address:**

P.O. BOX 4202 ENTERPRISE, FL 32725 US

DOCUMENT# N11000002762

## FEI Number: 59-1707634

## Name and Address of Current Registered Agent:

WATSON, EARNEST H. 1870 ENTERPRISE OSTEEN RD ENTERPRISE, FL 32738 US

I

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	EARNEST H WATSON			02/01/2023
	Electronic Signature of Registered Agent			Date
Officer/Direc	tor Detail :			
Title	PDVST	Title	TD	
Name	WATSON, EARNEST H.	Name	HANSEN, DALE E.	
Address	P.O. BOX 4202	Address	811 ORANOLE ROAD	
City-State-Zip:	ENTERPRISE FL 32725	City-State-Zip:	MAITLAND FL 32751	
Title	SD	Title	V.P.	
Name	ADAMCZYK, MARTHA	Name	LANDERS, BRANDY	
Address	22 S SHELL RD	Address	P.O. BOX 4202	
City-State-Zip:	DEBARY FL 32713	City-State-Zip:	ENTERPRISE FL 32725	
Title	т			
Name	BRUCE, CATHERINE			
Address	190 CLARK ST.			
City-State-Zip:	ENTERPRISE FL 32725			

Certificate of Status Desired: No

FILED Feb 01, 2023 Secretary of State 5117337974CC

Date

02/01/2023

TREASURER

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: ENTERPRISE EVERGREEN CEMETERY, INC.