

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44169

**FILED
Mar 15, 2021
Secretary of State
6213884578CC**

Entity Name: PINE LEVEL CAMPGROUND CEMETERY, INC.

Current Principal Place of Business:

C/O LOU HOOPINGARNER OR BETH THORNTON
5389 NW LILY AVENUE
ARCADIA, FL 34266

Current Mailing Address:

C/O LOU HOOPINGARNER OR BETH THORNTON
5389 NW LILY AVENUE
ARCADIA, FL 34266 US

FEI Number: 65-0278994

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WALDRON, EUGENE EJR
124 N BREVARD AVE
ARCADIA, FL 34266 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 SECRETARY
Name THORNTON, BETH
Address 5389 NW LILY AVE
City-State-Zip: ARCADIA FL 34266

Title D
Name MAYS, CURT
Address 301 VALDOSTA RD
City-State-Zip: ARCADIA FL 34266

Title D
Name SHATNEY, SHARON
Address 2693 NW PINE CREEK AVE.
City-State-Zip: ARCADIA FL 34266

Title PD
Name BEVIS, WILLIAM
Address 2644 NW TOM MIZELL AVE
City-State-Zip: ARCADIA FL 34266

Title VP
Name ALTMAN, CECIL
Address 4216 SW LANGFORD ST.
City-State-Zip: ARCADIA FL 34266

Title TREASURER
Name HOOPINGARNER, MARY LOU
Address 5389 NW LILY AVENUE
City-State-Zip: ARCADIA FL 34266

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: MARY LOU HOOPINGARNER

TREASURER

03/15/2021

Electronic Signature of Signing Officer/Director Detail

Date