### **2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N44169

Entity Name: PINE LEVEL CAMPGROUND CEMETERY, INC.

FILED
Apr 06, 2022
Secretary of State
9241449852CC

# **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	Title	D

Name THORNTON, BETH Name MAYS, CURT

Address 5389 NW LILY AVE Address 301 VALDOSTA RD

City-State-Zip: ARCADIA FL 34266 City-State-Zip: ARCADIA FL 34266

Title D Title PD

Name SHATNEY, SHARON Name BEVIS, WILLIAM

Address 2693 NW PINE CREEK AVE. Address 2644 NW TOM MIZELL AVE

City-State-Zip: ARCADIA FL 34266 City-State-Zip: ARCADIA FL 34266

Title VP Title TREASURER

Name ALTMAN, CECIL Name HOOPINGARNER, MARY LOU

Address 4216 SW LANGFORD ST. Address 5389 NW LILY AVENUE

City-State-Zip: ARCADIA FL 34266 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** 

04/06/2022