

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51430

Entity Name: PONCEANNAH CEMETERY ASSOCIATION, INC.

Current Principal Place of Business:

23813 CR 42
PAISLEY, FL 32767

Current Mailing Address:

POST OFFICE BOX 463
PAISLEY, FL 32767 US

FEI Number: 59-3161906

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MATHEWS, JOHN JR
1325 NADINE DR.
DELAND, FL 32738 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 VP
Name MORRIS, MELISSA
Address 26740 FISHERMAN'S RD
City-State-Zip: PAISLEY FL 32767

Title TRUSTEE
Name MATHEWS, JOHN JR.
Address 1325 NADINE
City-State-Zip: DELAND FL 32738

Title TRUSTEE
Name HAYS, DANIEL R
Address 43910 EAST RD
City-State-Zip: PAISLEY FL 32767

Title SECRETARY, TREASURER
Name GORDON, JANICE CROW
Address 17929 LAKE LUCY LN
City-State-Zip: GROVELAND FL 34736

Title PRESIDENT
Name KNIGHT, KIMBERLY
Address 1930 VAN CLEEF RD
City-State-Zip: DELAND FL 32720

Title TRUSTEE
Name BENNETT, NELL
Address 210 MARK TRL
City-State-Zip: ATLANTA GA 30328

Title TRUSTEE
Name HUTSON, SARAH
Address 30234 CR 42
City-State-Zip: DELAND FL 32720

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: DANIEL HAYS

TRUSTEE

03/30/2019

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date