## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000727

Entity Name: MOUNT OLIVE PRIMITIVE CEMETERY, INC.

FILED Feb 10, 2024 Secretary of State 0939864786CC

**Current Principal Place of Business:** 

**5924 LUNN RD** 

LAKELAND, FL 33811-2121

**Current Mailing Address:** 

**5924 LUNN RD** 

LAKELAND. FL 33811-2121 US

FEI Number: 65-0664866 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOWELL, MARTHA 5924 LUNN RD

LAKELAND, FL 33811-2121 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: MARTHA HOWELL 02/10/2024

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title SECRETARY TREASURER

Name HOWELL, GUY E Name HOWELL , MARTHA F

Address 5924 LUNN RD Address 5924 LUNN RD

City-State-Zip: LAKELAND FL 33811-2121 City-State-Zip: LAKELAND FL 33811-2121

Title VP Title DIRECTOR

Name WATERS, CLAUDE A JR. Name WETHERINGTON, JAMES N JR.

Address 2020 HARLEY LANE Address P O BOX 306

City-State-Zip: LAKELAND FL 33811-2394 City-State-Zip: BRADLEY FL 33835-0306

Title DIRECTOR

Name FREEMAN, JUSTIN
Address 5767 OLD HIGHWAY 37

City-State-Zip: MULBERRY FL 33860-8824

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: MARTHA F HOWELL

SECRETARY/TREASURER 02/10/2024

Electronic Signature of Signing Officer/Director Detail

Date