

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000098976

**Entity Name:** COMPASS LAKE COMMUNITY CEMETERY, LLC**Current Principal Place of Business:**427 LAKE POINT ROAD  
ALFORD, FL 32420**Current Mailing Address:**427 LAKE POINT ROAD  
ALFORD, FL 32420**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GLAZE, RONALD E  
345 CITY SQUARE ROAD  
COMPASS LAKE, FL 32420 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**Authorized Person(s) Detail :**

Title	MGRM	Title	D
Name	COMPASS LAKE ASSOCIATION, INC.	Name	CUTCHEN, DAVID
Address	427 LAKEPOINT ROAD	Address	2489 KINFOLK DR
City-State-Zip:	ALFORD FL 32420	City-State-Zip:	ALFORD FL 32420
Title	D		
Name	GLAZE, RONALD E		
Address	345 CITY SQUARE RD		
City-State-Zip:	ALFORD FL 32420		

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JUANITA SEAY**SECRETARY/TREASURER** 01/29/2023\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date