FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED

Feb 06, 1999 8:00am

Secretary of State

02-06-1999 90009 048 ****61.25

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 700418

1. Corporation Name

OAKDALE CEMETERY ASSOCIATION

	•						
Principal Place of Business Mailing Address							
800 n. Clara ave. 725 n. Florida avenue		OAKDALE CEMETERY 725 NORTH FLORIDA AVENUE					
del and fl 32 7 Us	720	DELAND FL 32720 US					
us							
2. Principal Pla	ace of Business	2a. Mailing Address			3. Date Incorporated or Qualifed		
26				02/10/1960 4 FFI Number Applied For		lind For	
Suite, Apt. i	#, etc.	Suite, Apt. #, etc.			4. FEI Number 59-0380205	, 	Applicable
2		27			39 0300203	\$8.75 A	
City & State	9	City & State			5. Certificate of Status Desired	Fee Re	
3		28	Col	intry	6. Election Campaign Financing	\$5.00	Mav Be
Zip	Country	Zip	30	y	Trust Fund Contribution	Added to	-
4	9. Name and Address of Curre	29 29 Agent	1301		10. Name and Address of New Registe	red Agent	
	9. Name and Address of Curre			81 Name			
	D DICHARD A			82 Street Addre	ess (P.O. Box Number is Not Acceptable)		
BRUNNING	G. RICHARD A.V.	M		Sueer Addit	655 (1.6. 56A 11411125 15 15 15 15 15 15 15 15 15 15 15 15 15		
/25 NURI	H FLORIDA AVENUE			83			
DELAND F	L 32720	-		84 City		85 Zip C	ode
	•] *	oration submits this statement for the purpos on's board of directors. Thereby accept the a	r 🕒 , 📖 ,,,,,,	
Office or n Delagent 1 a US SIGNATURE	m familiar with, and accept the oblig	pations of Section 617.0503	, Florida Sta	tutes. d Agent signature require	d when reinstation) DAT	E Flöh Sidii disei die	
12.		ND DIRECTORS	13.	 	ADDITIONS/CHANGES TO OFFICER	Change	Addition
TITLE	P	☐ DELET	TE 1.1 T	TTLE			
NAME	STEPP, DAVID	•		IAME	50 633a84 Published		,
STREET ADDRESS	235 KINCAID AVE			TREET ADDRESS	THE STATE SHOWS TO SEE	•	
CITY-ST-ZIP	DELAND, FL 00000			CITY-ST-ZIP		☐ Change	Addition
πŒ	V	☐ DELE		TITLE			_
NAME	BRADLEY, KENNETH	- *	1 1	AME			. :
STREET ADDRESS	799 TORCHWOOD AVE.			STREET ADDRESS			
CITY-ST-ZIP	DELAND FL	DELE		CITY-ST-ZIP TITLE		☐ Change	☐ Addition
TITLE	AT	***		NAME			
NAME	BRUNNING, RICHARD A. 725 N. FLOR. AVE.	3.19		STREET ADDRESS			
	DELAND FL		1	CITY-ST-ZIP			
CITY-ST-ZIPRO	D TELEND FL	□ DELE		TITLE		☐ Change	Addition
	2001/20 101/		4. 2	NAME	. 安水水 (1. 黄) 安全(1) (1. 安) · · · · · · · · · · · · · · · · · ·	的特别智慧剧群剧智能标文	1.000000000000000000000000000000000000
NAME H. CLARA STREET ADDRESS	ALA E EL ODENIOE AVENUE	SANACT HITT PARTO BINGS	4.3	STREET ADDRESS	5 4 13 55 7 13 15 15 15 15 15 15 15 15 15 15 15 15 15		
CITY-ST-ZIP	1	North Oak		CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		T Addition
TITLE	D	, DELE		TITLE		Change	Addition
NAME	GOULD, VINCENT			NAME			
STREET ADDRESS	ASA E TAVEOR BOAD		1	STREET ADDRESS	15. 18. 18. 19. 19. 19. 19. 19. 19. 19. 19. 19. 19		
CITY-ST-ZIP	DELAND FL			CITY-ST-ZIP	Sp. 1. 14. S. C. S. F.	☐ Change	Addition
TITLE	Diere, Gebauf	☐ DELE		TITLE	And the second s	ا الماد	
NAME:	MARTIN, RICHARD		1	NAME	• • • •	•	1.1.
STREET ADDRESS	TOTAL ADDOLLED TOTE TOTAL		6.3	STREET ADDRESS			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

256 CROOKED TREE TRAIL