

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 726410

**Entity Name:** KENANSVILLE CEMETERY, INCORPORATED**Current Principal Place of Business:**100 LAKE MARIAN RD.  
KENANSVILLE, FL 34739**Current Mailing Address:**P.O. BOX 85  
KENANSVILLE, FL 34739**FEI Number:** 59-2064739**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**VICKERS, CATHY PRESIDENT  
925 N CANOE CREEK RD  
KENANSVILLE, FL 34739 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:** CATHY VICKERS

04/27/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           SMOTHERS, BEULAH  
Address        429 SPOONBILL COURT.  
City-State-Zip: KENANSVILLE FL 34739

Title           DIRECTOR  
Name           HARVEY, LILLIANE  
Address        425 HARVEY RD.  
City-State-Zip: KENANSVILLE FL 34739

Title           VP  
Name           HEATH, CHARLES  
Address        240 4TH AVENUE  
City-State-Zip: KENANSVILLE FL 34739

Title           DIRECTOR  
Name           PARTON, LEE  
Address        925 N CANOE CREEK  
City-State-Zip: KENANSVILLE FL 34739

Title           DIRECTOR  
Name           SINQUEFIELD, ANNIE G BOARD  
                  MEMBER  
Address        530 MINNOW CT  
City-State-Zip: KENANSVILLE FL 34739

Title           DIRECTOR  
Name           VALLEY, LOIS W DIRECTOR  
Address        530 MINNOW CT  
City-State-Zip: KENANSVILLE FL 34739

Title           SECRETARY  
Name           HEATH, JUDY  
Address        240 4TH AVENUE  
City-State-Zip: KENANSVILLE FL 34739

*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:** BEULAH SMOTHERS

TREASURER

04/27/2017

Electronic Signature of Signing Officer/Director Detail

Date