

N04521

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

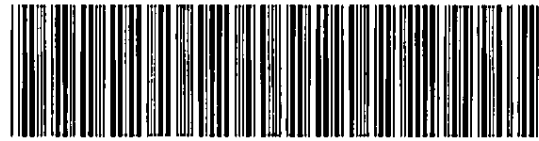
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700334357057

HUGH D. FISH, JR.
ATTORNEY AT LAW
POST OFFICE BOX 331
MACLENNY, FLORIDA 32063

August 1, 1984

Division of Corporations
P. O. Box 327
Tallahassee, Florida 32301

RE: Oak Grove Cemetery Association, Inc.

Dear Sirs:

Enclosed herein please find the original and one copy of the Articles of Incorporation for the above-named, non-profit corporation. Also, enclosed is a check in the amount of \$38.00 for the following:

Filing fee	\$ 30.00
Certified copy of Articles	5.00
Cert. designating Reg. Agent	3.00
	<u>\$ 38.00</u>

Should you have any problem with the information as submitted, please do not hesitate to call us.

Thanking you in advance for your kind assistance in this matter,
I remain, Jean Anderson GAVE

AUTHORIZATION BY PHONE TO

CORRECT ADDRESS FOR DIC. INC.

DATE Aug 7-84

KRG

KRG 8-2

KRG 6A

KRG 8-2

KRG

KRG 8-3

KRG

KRG 8-3

KRG

KRG

Jean Anderson, Secretary
Hugh D. Fish, Jr.

NON-PROFIT CORP.

FILING	\$30
C. COPY	5
R. AGENT	3
TOTAL	\$38
BALANCE DUE \$	
REFUND \$	

N04521

1700001

ARTICLES OF INCORPORATION
OF
OAK GROVE CEMETERY ASSOCIATION, INC.
(A Florida Nonprofit Corporation)
A Family-type Cemetery

The undersigned Incorporators of OAK GROVE CEMETERY ASSOCIATION, INC. hereby associate themselves together as a corporation not for profit under the following Article of Incorporation, to-wit:

ARTICLE I. NAME AND LOCATION

The name of this corporation not for profit shall be OAK GROVE CEMETERY ASSOCIATION, INC. and shall be located at Route 2, County Road 200, Glen St. Mary, Florida 32040.

ARTICLE II. PURPOSES AND POWERS

The purpose of this Corporation is to establish, maintain and operate a cemetery for the burial of the dead, and to acquire lands to be held and occupied exclusively for a cemetery for the burial of the dead, or set apart for cemetery purposes; and the Corporation shall be empowered to acquire, own, hold, lease, mortgage, sell and convey real estate for the purposes herein set forth; to receive donations of money and property, real, personal, and mixed, for such purposes, and for all the purposes hereinafter set forth; to receive legacies, devises, gifts and donations, money and property of all kinds, real, personal, and mixed, for such purposes herein expressed; to expend money for any of the aforesaid purposes; to purchase, own, acquire, sell and dispose of membership shares, certificates of indebtedness, bonds, debentures, and stock of any corporation, person or association of persons, for any and all of the aforesaid purposes; to have and exercise all of the powers conferred by the laws of the State of Florida under corporations not for profit organized under the laws of the State of Florida. The several clauses contained in this general statement of the object of the Corporation shall be construed as both purposes and powers, and the statements contained in each clause shall, except where otherwise expressed, be in no wise limited or restricted by reference to, or inference from the terms of any other clause, but shall be regarded

for independent purposes and powers. Any and all of the rights, powers, privileges, or restrictions in these Articles granted and contained, conferred or imposed, may be enlarged, amended, altered and changed in any manner and to any extent or repealed by Certificate of Amendment made, executed, authorized or filed in any manner, now or hereafter permitted or authorized by the laws of the State of Florida.

ARTICLE III. QUALIFICATIONS OF MEMBERS

The qualifications of members of this corporation are as follows, to-wit: Natural persons who are descendants of previously buried persons in the Cemetery, and permanent residents of Baker County, Florida, who are not descendants, but have shown a concern for and willingness to help maintain said Cemetery and to donate their time and to work for the purposes hereinabove expressed, and all such persons shall be accepted into membership in open meeting assembled, when approved by a majority vote of all membership at said meeting.

ARTICLE IV. TERM OF EXISTENCE

This Corporation shall have perpetual existence.

ARTICLE V. INCORPORATORS

The names and residences of the incorporators are:

JESSE D. YARBOROUGH	Route 2, Glen St. Mary, FL
ALTON CRAWFORD	North 5th Street, MacLenny, FL
O. M. YARBOROUGH	560 Weldon St., Starke, FL 32091

ARTICLE VI. TRUSTEES

The names and residences of the Trustees are:

JESSE D. YARBOROUGH	Route 2, Glen St. Mary, FL
ALTON CRAWFORD	North 5th Street, MacLenny, FL
O. M. YARBOROUGH	560 Weldon St., Starke, FL 32091

ARTICLE VII. OFFICERS

1. The officers of the Corporation shall be a President, Vice-President, Secretary and Treasurer, and such other officers as may be provided in the Bylaws.

2. The names of the persons who are to serve as officers of the Corporation until the first annual meeting of the membership are as follows:

PRESIDENT: O. M. Yarbrough

VICE-PRESIDENT: Jesse D. Yarbrough

SECRETARY/TREASURER: Alton Crawford

3. All officers of this Corporation shall hold office for a period of one year and shall be elected at the annual meeting of the membership by a majority vote of all the members.

ARTICLE VIII. BOARD OF DIRECTORS

The affairs of the Corporation shall be managed by a Board of Directors consisting of three (3) members selected from the public at large of Baker County, Florida. The names and addresses of the first Directors who shall manage this Corporation until the first annual meeting are:

JESSE D. YARBROUGH Route 2, Glen St. Mary, FL

ALTON CRAWFORD North 5th Street, MacLenny, FL

O. M. YARBROUGH - 560 Weldon St., Starke, FL 32091

There shall never be less than three (3) directors of this Corporation.

ARTICLE IX. MEETINGS

The membership of this Corporation shall meet at least twice each year; on the Second (2nd) Saturday in February and on the second (2nd) Saturday in October of each year, and the Board of Directors and the Officers of this Corporation shall be elected at the second Saturday in February meeting as provided herein.

ARTICLE X. DESIGNATION OF REGISTERED OFFICE AND AGENT

The registered office of this Corporation shall be located at the same address as its business office which is Route 2, County Road 23D, Glen St. Mary, Florida 32040, and O. M. YARBROUGH is hereby designated the registered agent for this Corporation, whose residence is 560 Weldon Street, Starke, Florida 32091.

ARTICLE XI. BYLAWS

The Bylaws of this Corporation are to be made, altered or rescinded by a majority of all qualified members who are present and voting at any meeting.

shall be open ballot, at any regular or special meeting called by the majority of the Board of Directors.

ARTICLE XII. AMENDMENTS

The Articles of Incorporation may be amended at a meeting of the members of the Corporation, duly called and convened for such purpose provided there is a majority of the members present, and if approved by a majority of the qualified members; the amendment shall form part of said Article of Incorporation upon consequent approval thereof by the Secretary of State of the State of Florida.

IN WITNESS WHEREOF, we the undersigned, subscribing incorporators, have hereunto set our hands and seals this 27th day of July, 1984, for the purposes of forming this Corporation not for profit under the laws of the State of Florida.

Jesse D. Varborough (SEAL)
JESSE D. VARBOROUGH
Alton Crawford (SEAL)
ALTON CRAWFORD
O. M. Varborough (SEAL)
O. M. VARBOROUGH

STATE OF FLORIDA
COUNTY OF BAKER

Before me, a Notary Public, duly authorized in the State and County named above to take acknowledgements, personally appeared JESSE D. VARBOROUGH, ALTON CRAWFORD, and O. M. VARBOROUGH, to me known to be the persons described as directors and who executed the foregoing Articles of Incorporation, and acknowledged before me that they executed same for the purposes therein expressed.

WITNESS my hand and seal in the County and State named above this 27th day of July, 1984, A.D.

Lorraine Marie Tenina
Notary Public
My Commission Expires:

Notary Public, State of Florida
My Commission Expires May 15, 1985
Baker County, Florida

THE UNIVERSITY OF CHICAGO

T. Martin, Jr., Chief of Corporation Principal Officer

2. Large Company or Divisional Companies: The
Office FOIA Unit has been advised by the FBI

[illegible]
$$f: \mathbb{R}^n \rightarrow \mathbb{R}^n, \quad f(x) = \begin{pmatrix} x_1 \\ x_2 \\ \vdots \\ x_n \end{pmatrix}$$

1. ADGVA SUBJECT IS INFORMATION ON THE WAY TO THE COURT AND ON
THE WAY TO THE COURT AND ON

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15

DATE INCORPORATED OR QUALIFIED: 03/02/1984
IN THE STATE OF: FLORIDA

1. Project: [Project Name]

4. Conclusion

6. Warren and Street Addresses of Each Officer and Director as of December 31, 1941:

James H. Oliver

7 000

REPORT MADE BY THE

623, 48-12 5-9-54

2 YARBOROUGH, JESSE C.

V/D ROUTE 2

GLEN ST. MARY, FL

2 CRAWFORD, ALTON

S/T/DNORTH 5TH STREET

MACLENNY, FL

J YARBROUGH, O.M.

P/O SLD NELSON STREET

STARKE, FL 32091

Registered Agent Information

THE UNIVERSITY OF CHICAGO PRESS

ה' תשס"ח

YARBOROUGH, O.H.
ROUTE 2, COUNTY ROAD 220
GLEN ST. MARY, FL

32340

4435

[illegible]

7.5. 526 422: 523:

1. This document is prepared by Section 50134 and 50135, Foreign Section, the United States Information Administration, organized under the laws of the District of Columbia for the purpose of changing the established offices of representatives, or agents, of the State of Florida. Such change was authorized by report of the Florida Council on the basis of information.

I hereby accept the assignment of engineering agent I am familiar with and except on violation of Section 501 of P.S.

4174A 1995

Registered Agent Accepting Appointment

- 547 -

\$3.00 additional fee required for Registered Agent changes.

19 Sed. and/or other factors may be involved in the formation of the sedimentary rocks.

I further certify that I understand the foregoing Certificate and hereby certify that I am not a member of the Communist Party, nor have I ever been a member of the Communist Party, nor have I ever been a member of any organization which advocates the overthrow of the Government of the United States by force or violence.

1990

June 25, 1985

Odin Yarnborough

President

904-954-6447

\$5 additional fee required for a Certificate of Status

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

ANNUAL REPORT
1986



STATE OF FLORIDA
DEPARTMENT OF REVENUE
TALLAHASSEE, FLORIDA 32301

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$20 Required - Make Checks Payable To: Secretary of State

WHEEL
3
CROVE CEMETERY ASSOCIATION, INC.
ROUTE 2, COUNTY ROAD 230
WABECROUGH
STARKE, FL 32091
EL W. WELDON ST.

IF YOU ARE A NEW REGISTRANT, YOU MUST COMPLETE THIS SECTION

08/02/1984 07/02/1985

WABECROUGH, JESSE D.

V/O ROUTE 2

GLEN ST. MARY, FL

CR. ROAD, ALTON

S/T/O NORTH 5TH STREET

MOLENNY, FL

WABECROUGH, O.M.

P/O 560 WELDON STREET

STARKE, FL

REGISTERED AGENT INFORMATION

NAME AND ADDRESS OF THE AGENT

WABECROUGH, O.M.
ROUTE 2, COUNTY ROAD 230
GLEN ST. MARY, FL 32040

NAME AND ADDRESS OF THE REGISTERED AGENT

WABECROUGH, O.M.

FL.

FL.

IF YOU ARE A NEW REGISTRANT, YOU MUST COMPLETE THIS SECTION

\$3.00 additional fee required for Registered Agent changes.

IF YOU ARE A NEW REGISTRANT, YOU MUST COMPLETE THIS SECTION

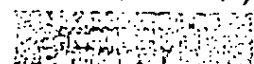
IF YOU ARE A NEW REGISTRANT, YOU MUST COMPLETE THIS SECTION

IF YOU ARE A NEW REGISTRANT, YOU MUST COMPLETE THIS SECTION

[Handwritten signature]

P. P.

June 6 '86
904-9846447



FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1, 1987

CORPORATION
ANNUAL REPORT
1987



FLORIDA DEPARTMENT OF STATE
Division of Corporations
Tallahassee, Florida

1987 JUL 23 11:10:07

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$25 Required - Make Checks Payable To: Secretary of State

FLORIDA DEPARTMENT OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

1. Name and Address of Corporation Principal Office

NO4521 3
OAK GROVE CEMETERY ASSOCIATION, INC.
560 U. WELDON ST.
C/O O. M. YARBOROUGH
STARKE, FL. 32091

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Above is NOT Full Name

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

3. Date of Report or Qualified 08/02/1984

4. Federal Employer Identification Number (FEIN)

5. Date of Last Report 07/15/1986

6. List the Street Addresses of Each Officer and Director as of December 31, 1986

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
YARBOROUGH, JESSE D.	V/O	ROUTE 2	GLEN ST. MARY, FL
ORRISFORD, ALTON	S/T/O	NORTH 5TH STREET	MADENNY, FL
YARBOROUGH, O. M.	P/O	560 WELDON STREET	STARKE, FL

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

YARBOROUGH, O. M.
ROUTE 2, COUNTY ROAD 230
GLEN ST. MARY, FL 32040

8. Name and Address of New Registered Agent

Street Address 1 (Do NOT Use P.O. Box Number) 27

Street Address 2 (Do NOT Use P.O. Box Number) 33

City and State 24

FL

Zip Code 24

I, the undersigned, do hereby certify that the above named corporation, incorporated under the laws of the State of Florida, is in good standing for the purpose of changing its registered office or registered agent on both in the State of Florida. I am authorized to execute this report and to file it with the Department of State, and I am authorized to accept the appointment of registered agent, I am familiar with and accept the obligations of Section 607.05, F.S.

SIGNATURE: *O. M. Yarbrough*
(Registered Agent Accepting Appointment)

DATE: *July 3, '87*

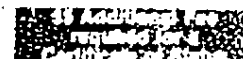
\$3.00 additional fee required for Registered Agent changes.

See signature instructions under instructions on reverse side of this form.

I certify that I am an Officer of the Corporation, the Registered Agent, or a Trustee of the Corporation, and I understand that my signature on this report shall have the same legal effect as if made under oath. (This statement must be signed in Block.)

Date

PIC



FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST

CORPORATION

ANNUAL REPORT
1989



FLORIDA DEPARTMENT OF REVENUE
John Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
FILED
JUN 22 1989
TALLAHASSEE, FLORIDA

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$35 Required - Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

ZIP + 4

NO4521 3
OAK GROVE CEMETERY ASSOCIATION, INC.
560 W. WELDON ST.
C/O O.M. YARBOROUGH
STARKE, FL. 32091

2. Enter Change of Address of Corporation Principal Office, PO Box Number and Address (NOT for use by corporations)

Street Address

PO Box No.

City, State and Zip

2d. County

3. State whether corporation is subject to any of the following provisions of the Florida Statutes:
a. Section 218.01
b. Section 218.02

4. Incorporation Date: 09/02/1984 5. Federal Employer Identification Number: 26-3529573 6. Date of Last Report: 03/07/1988

7. Name of Officer, Director, or Agent for Service of Process: YARBOROUGH, JESSIE D. 8. Address of Officer, Director, or Agent for Service of Process: ROUTE 2, GLEN ST. MARY, FL

NAME	ADDRESS	CITY
YARBOROUGH, JESSIE D.	ROUTE 2	GLEN ST. MARY, FL
CRAWFORD, ALTON	NORTH 5TH STREET	MACLENNY, FL
YARBOROUGH, O.M.	560 WELDON STREET	STARKE, FL

REGISTERED AGENT INFORMATION

YARBOROUGH, O.M.
ROUTE 2, COUNTY ROAD 230
GLEN ST. MARY, FL 32040

FL

9. Signature of Registered Agent: *O.M. YARBOROUGH* 10. Date: June 16, '89

11. Signature of Secretary of State: *[Signature]*

12. State whether corporation is subject to any of the following provisions of the Florida Statutes:
a. Section 218.01
b. Section 218.02

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST.

CORPORATION

**ANNUAL REPORT
1988**



JOHN SMITH
Secretary of State
DIVISION OF CORPORATIONS

Filing Fee of \$25 Required - Make Checks Payable To: Secretary of State

Name and Address of Corporation Principal Office

NO4521
OAK GROVE CEMETERY ASSOCIATION, INC.
560 W. WELDON ST.
C/O O.M. YARBOROUGH
STARKE, FL. 32091

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number, Address, City, State, and Zip. (If Not Applicable, Leave Blank)

Street Address 2:

P.O. Box No. 20:

City and State 20:

Zip Code 20:

State of Florida is a limited liability corporation. The entire amount of the filing fee must be paid in advance.

Date of Incorporation in Florida

08/02/1984

1. Federal Employer Identification Number (EIN)

263-52-9573

3. Date of

07/23/1987

Name and Address of Corporation Principal Office, P.O. Box Number, Address, City, State, and Zip. (If Not Applicable, Leave Blank)

YARBOROUGH, JESSE D.

V/D

ROUTE 2

GLEN ST. MARY, FL

SPANFORD, ALTON

S/I/D

NORTH 5TH STREET

MACLENNY, FL

YARBOROUGH, O.M.

P/D

560 WELDON STREET

STARKE, FL

REGISTERED AGENT INFORMATION

YARBOROUGH, O.M.

ROUTE 2, COUNTY ROAD 230

GLEN ST. MARY, FL 32040

Name 2:

Street Address 2: 1000 1ST ST, GLEN ST. MARY, FL

State Address 2: 32040

City and State 2:

FL

DATE

February 8, 1988

(904) 954-9573

Registered Agent

O. M. YARBOROUGH

Official Record
Deposited by
Secretary of State

FILE NOW! THIS ANNUAL REPORT WILL BE DELINQUENT AFTER JULY 1ST

FD-204 (Rev. 1-1-87)

NOTIFICATION

ANNUAL REPORT
1990



DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA 32399-0001

Read Instructions and Instructions on Other Side Before Making Entries
Filing Fee of \$35 Required — Make Checks Payable To: Secretary of State

1. Enter the Address of Corporation Principal Office

N04521 3

ZIP + 4 PRESORT

OAK GROVE CEMETERY ASSOCIATION, INC.
560 W. WELDON ST.
C/O O.M. YARBOROUGH
STARKE, FL. 32091-1449

2. Enter the Address of the Office in any way other than the correct address
in item 1. Include Zip Code.

3. If Address in Item 1 is incorrect in any way, enter the
correct address below. PO box number alone is NOT sufficient.
If the corporation can be changed only by having an am-

ended Address 21

PO Box No. 22

City and State 23

Zip Code 24

3. Enter the Date of the Report
To Be Reported in Florida

08/02/1984

4. Filing Number

26-3529573

5. Filing Number Assigned
by the Secretary of State

6. Enter the Name and Address of Each Officer and Director (Do not use any correction tape or glue to cover over incorrect information.)

7. Name of Officer or Director	8. Street Address of Each Officer and Director (Do not use PO Box Numbers)	9. City and State
V/D YARBOROUGH, JESSE D.	ROUTE 2	GLEN ST. MARY, FL
S/T/D CRAWFORD, ALTON	NORTH 5TH STREET	MACLENNY, FL
P/D YARBOROUGH, O.M.	✓ 560 WELDON STREET	STARKE, FL

REGISTERED AGENT INFORMATION

1. Enter the Name and Address of the Registered Agent

YARBOROUGH, O.M.
ROUTE 2, COUNTY ROAD 23D
GLEN ST. MARY, FL 32040
✓ 560 W. WELDON ST.
STARKE, FL 32091

2. Enter the Address of the Registered Agent (Do not use PO Box Numbers)

3. Enter the Address of the Registered Agent (Do not use PO Box Numbers)

4. Enter the State

FL

5. Enter the Date

6-8-90

O.M. YARBOROUGH

O.M. YARBOROUGH

6-8-90

Seal of the State of Florida

FILE NOW! CORPORATE STATUS WILL BE
DELINQUENT AFTER JULY 1ST.

CORPORATION
ANNUAL REPORT
1991



FLORIDA DEPARTMENT OF STATE
JIM SMITH
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
FL DEPT. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FL
FILED

Read Instructions on Other Side Before Making Entries
FILING FEE OF \$61.25 REQUIRED

DO NOT WRITE IN THIS SPACE

1. Name and Mailing Address of Corporation: **DOCUMENT # N04521 (3)**

ZIP + 4 PRESORT

OAK GROVE CEMETERY ASSOCIATION, INC.
560 W. WELDON ST.
C/O O.M. YARBOROUGH
STARKE, FL. 32091-1449

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Street Address

22 P.O. Box No.

23 City and State

24 Zip Code

3. Above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

3. Date of Incorporation or Qualification
to do Business in Florida

08/02/1984

4. FEI Number

26-3529573

FEI Number Applied For

FEI Number Not Applied For

5. \$8.75 Additional Fee required
for a Certificate of Status

CERTIFICATE OF STATUS REQUIRED

6. Name and Street Addresses of Each Officer and Director (Do not use any correction tags or forms to cover over incorrect information.)

7. Name of Officers and Directors	8. Street Address of Each Officer and Director (Do NOT use P.O. Box Numbers)	9. City and State
V/D YARBOROUGH, WILLIAM O.	HWY 228 SOUTH	MACCLERNY, FLA. 32063
S/T/D CRAWFORD, ALTON	NORTH 5TH STREET	MACLENNY, FL
P/D YARBOROUGH, O.M.	560 WELDON STREET	STARKE, FL

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

YARBOROUGH, O.M.
560 W. WELDON ST.
STARKE, FL 32091

8. Name

9. Street Address (Do NOT use P.O. Box Numbers)

10. State Address (Do NOT use P.O. Box Numbers)

11. City

FL

I, the undersigned, being a resident of the State of Florida, do hereby certify that the above named corporation is a corporation organized under the laws of the State of Florida, and that the information furnished on this report is true and accurate, and that the corporation is not delinquent in its annual report filing. I am a resident of the State of Florida, and I am a resident of the State of Florida, and I am a resident of the State of Florida.

SIGNATURE (Registered Agent Accepting Appointment)

I hereby certify that the information furnished on this report is true and accurate, and that the corporation is not delinquent in its annual report filing. I am a resident of the State of Florida, and I am a resident of the State of Florida, and I am a resident of the State of Florida.

SIGNATURE *O.M. YARBOROUGH*

FILING FEE OF \$61.25 REQUIRED - Make Checks Payable to: Secretary of State \$8.75 Additional Fee required for a Certificate of Status

**FILE NOW! CORPORATE STATUS WILL BE
DELINQUENT AFTER JULY 1ST.**

**CORPORATION
ANNUAL REPORT
1992**



FLORIDA DEPARTMENT OF STATE
JAN 20 1993
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
SEC. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FLA.
FILED

FILING FEE \$61.25 Make Payable To: Secretary of State.

1. Name and Mailing Address of Corporation: **DOCUMENT #N04521 (3)**

**OAK GROVE CEMETERY ASSOCIATION, INC.
560 W. WELDON ST.
C/O O.M. YARBOROUGH
STARKE FL 32091-1449**

2. Has your corporation been organized in accordance with the laws of the State of Florida? ☒ Yes ☐ No

21. Mailing Address:

22. Principal Office:

23. Registered Office: 24. City and State:

3. Date of expiration of Quorum: **08/02/1984**

4. Filing Date: **06/10/1991** 5. Filing Number: **26-9529573** 6. Filing Fee: **\$8.75** 7. Address and Fee required for a Certificate of Status: **CERTIFICATE OF STATUS**

8. List of Officers and Directors (Do not use any correction tapes to list the names and addresses of officers and directors.)

1. Name	2. Title	3. Street Address (if not a P.O. Box)	4. City and State
V/D	YARBOROUGH, WILLIAM O.	HWY 228 SOUTH	MACLENNY, FL
S/T/D	CRAWFORD, ALTON	NORTH 5TH STREET	MACLENNY, FL
P/D	YARBOROUGH, O.M.	560 WELDON STREET	STARKE, FL

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent:

**YARBOROUGH O.M.
560 W. WELDON ST.
STARKE, FL 32091**

81. Name: 82. Street Address: 83. City and State: 84. FL 85.

SIGNATURE: *William O. Yarbrough*

William O. YARBOROUGH, Vice President 909 254 3654

APPROVED
AND
FILED

Jan Smith
Secretary of State
DEPARTMENT OF COMMERCE

1993 APR 23 PM 4:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # N04521 (3)

RECORDED
OAK GROVE CEMETERY ASSOCIATION, INC.
560 W WELDON ST
C/O O.M. YARBOROUGH
STARKE FL 32091-1449

FILING FEE \$25.00				ANNUAL REPORT \$61.25 + \$138.75 CORPORATION SUPPLEMENTAL FEE MAKE CHECK PAYABLE TO DEPARTMENT OF STATE				3. Date received and of Quoted 08/02/1984		3a. Date of Last Report 02/21/1992	
2. Address 26				2a. Principal Place of Business 26				5. Certificate of Status Issued ☐		\$8.75 Additional Fee Required	
2b. City, State, and Zip 27				2b. City, State, and Zip 27				6. Exemption Certificate, Franchise Tax, or Other Certificate ☐		\$5.00 May Be Added to Fees	
2c. Name of Agent 28				2c. Name of Agent 28				7. Tax-exempt with No Other Tax Exempt Status ☒		\$138.75 Suspend Fee Not Required	
2d. County 29				2d. County 29				8. The corporation is hereby authorized to conduct business in Florida Statutes ☒		10. Name and Address of New Registered Agent	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

YARBOROUGH. O.M.
560 W. WELDON ST.
STARKE FL 32091

81	Name	
82	Street Address P.O. Box Number Post Office	
83		
84	City	State Zip Code

[illegible]

15.66

2025 RELEASE UNDER E.O. 14176

1951年12月15日

V/D
YARBOROUGH, WILLIAM O.
HWY 228 SOUTH
MACLENNY FL.

S/T/D
CRANFORD, ALTON
NORTH 5TH STREET
MACLENNY FL

P/D
YARBOROUGH, O.M.
560 WELDON STREET
STARKE FL

127-4209	127-4210
127-4211	127-4212
127-4213	127-4214
127-4215	127-4216
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127-4289	127-4290
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127-4295	127-4296
127-4297	127-4298
127-4299	127-4300

SECRET
-S-13-35-1000-00

But Yarbrough gave
authorization by phone to chief
by 7. 00

4-73-92

SIGNATURE Amey Harbough
WILLIAM O. HARBOUGH .. DIRECTOR

4-5-93
204 258 3153

N04521

May 5, 1994

REPLACEMENT FEE 1994
ANNUAL REPORT: OAK GROVE CEMETERY
ASSOCIATION, INC.

700001181357
-05/03/94--01151--005
*****76.25 *****76.25

DEBIT MEMO: # 4694-A

CHECK #: 531

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

ANNUAL REPORT
1994



Department of State
BUREAU OF CORPORATIONS

APPROVED
AND
FILED

94 APR 22 AM 11:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #
N04521 (3)

OAK GROVE CEMETERY ASSOCIATION, INC.

560 W. WELDON ST.
C/O O.M. YARBOROUGH
STARKE FL 32081

560 W. WELDON ST.
C/O O.M. YARBOROUGH
STARKE FL 32081

DO NOT WRITE IN THIS SPACE

1. Date of Incorporation or Charter 08/02/1984	2a. Date of Last Meeting 04/23/1993
4. FEI Number 26-3529573	7. Franchise Fee \$3.75
5. Certificate of Status Desired [X] ☐	8. Franchise Fee \$5.00 May be Applied to Fees
6. This corporation has liability for intangible assets in Florida [X] Yes ☐ No	

9. Name and Address of Current Registered Agent YARBOROUGH, O.M. 560 W. WELDON ST. STARKE FL 32081	10. Name and Address of New Registered Agent [Blank]
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11. I, the undersigned, being a resident of this State, do hereby certify that the foregoing is a true and correct copy of the annual report of the corporation as required by the laws of this State. Witness my hand and the seal of the Department of State, this 22nd day of April, 1994.

12. OFFICERS AND DIRECTORS	13. OFFICERS, DIRECTORS AND OFFICERS
V/O YARBOROUGH, WILLIAM O. HWY 228 SOUTH MACLENNY FL	V/O YARBOROUGH, WILLIAM O. HWY 228 SOUTH MACLENNY FL
S/O CRAWFORD, ALTON NORTH 5TH STREET MACLENNY FL	S/O CRAWFORD, ALTON NORTH 5TH STREET MACLENNY FL
P/O YARBOROUGH, O.M. 560 WELDON STREET STARKE FL	P/O YARBOROUGH, O.M. 560 WELDON STREET STARKE FL

SIGNATURE: *William O Yarbrough* WILLIAM O YARBOROUGH - 4-20-94 (94259315)