

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

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mertham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **018377 (2)**

1. Corporation Name
LAKELAND MEMORIAL GARDENS, INC.



Principal Place of Business
**2121 SYLVESTER ROAD
LAKELAND FL 33803**

Mailing Address
**2125 SOUTH BARTWO HIGHWAY
LAKELAND FL 33803
US**

3. Date Incorporated or Qualified **05/25/1953** 3a. Date of Last Report **02/14/1995**

4. FEI Number **59-0701247** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address

21 Sub- Apt. #, etc. 26 Sub- Apt. #, etc.

22 City & State 27 City & State

23 Zip 28 Zip

24 Country 25 Country 29 Country 30 Country

9. Name and Address of Current Registered Agent

**GRINSTEAD, JACK E.
2121 SYLVESTER ROAD
LAKELAND FL 33803**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the current agent, if not the same as the one on file

Date of Registration Agent's Appointment, if different from filing date

DATE

12. OFFICERS AND DIRECTORS

1. TITLE DELETE
P GRINSTEAD, JACK E
2. STREET ADDRESS
2121 SYLVESTER RD
3. CITY - ST - ZIP
LAKELAND, FL 00000

4. TITLE DELETE

5. NAME

6. STREET ADDRESS

7. CITY - ST - ZIP

8. TITLE DELETE

9. NAME

10. STREET ADDRESS

11. CITY - ST - ZIP

12. TITLE DELETE

13. NAME

14. STREET ADDRESS

15. CITY - ST - ZIP

16. TITLE DELETE

17. NAME

18. STREET ADDRESS

19. CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE Change Addition

2. NAME

3. STREET ADDRESS

4. CITY - ST - ZIP

5. TITLE Change Addition

6. NAME

7. STREET ADDRESS

8. CITY - ST - ZIP

9. TITLE Change Addition

10. NAME

11. STREET ADDRESS

12. CITY - ST - ZIP

13. TITLE Change Addition

14. NAME

15. STREET ADDRESS

16. CITY - ST - ZIP

17. TITLE Change Addition

18. NAME

19. STREET ADDRESS

20. CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Jack E. Grinstead* Jack E. Grinstead 2/8/96 941-688-2935

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Day/Month/Year Day/Year Phone #

CR2E034 (12/95)