

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

CORPORATION ANNUAL REPORT 1995

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



APPROVED AND FILED

95 APR 25 AM 9:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 642422 (0)

1. Corporation Name
SASSER FUNERAL HOME INC.

Principal Place of Business Mailing Address

20 SOUTH DUVAL STREET P.O. BOX 1188 QUINCY FL 32351

4126 NORLAND AVENUE BURNABY, B.C. V5G 3S8 CANADA

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

3. Date Incorporated or Qualified **10/22/1979** 3a. Date of Last Report **07/26/1994**

4. FEI Number **59-1948237** 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

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	P
NAME	SASSER, JIMMY S
STREET ADDRESS	RT. 6, BOX 107
CITY - ST - ZIP	QUINCY FL
TITLE	DA
NAME	HYNDMAN, PETER S
STREET ADDRESS	4126 NORLAND AVENUE
CITY - ST - ZIP	BURNABY B.C. V5G 3S8
TITLE	D
NAME	LOEWEN, RAYMOND L
STREET ADDRESS	4126 NORLAND AVE
CITY - ST - ZIP	BURNABY BC
TITLE	DVA
NAME	RUSSELL, ROBERT D
STREET ADDRESS	200 N FEDERAL HWY
CITY - ST - ZIP	POMPANO BEACH FL 33062
TITLE	ST
NAME	WRIGHT, GARY L
STREET ADDRESS	800 - 50 EAST RIVERCENTER BLVD.
CITY - ST - ZIP	COVINGTON KY 41011
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	600001467526
23 STREET ADDRESS	-04/28/95--01006--011
24 CITY - ST - ZIP	****200.00 ****200.00
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

4/25/95 NST

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 of this report, or on an attachment with an address.

SIGNATURE: _____ **Peter S. Hyndman** **4/12/95** **(604) 299-9321**

SIGNATURE AND TYPE OF POSITION OF SIGNING OFFICER OR DIRECTOR Date (Type in Figures)