

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jul 23, 2004  
Secretary of State**

DOCUMENT# 722468

Entity Name: THE FUNERAL CONSUMERS ALLIANCE OF NORTH CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

PO BOX 14662  
GAINESVILLE, FL 32604 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 14662  
GAINESVILLE, FL 32604 US

**New Mailing Address:**

FEI Number: 23-7165333      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HORNBERGER, ROBERT H  
4056 NW 23RD CIR.  
GAINESVILLE, FL 32605 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: GRIFFITHS, NELSON M  
Address: 4336 NW 22ND AVE.  
City-St-Zip: GAINESVILLE, FL 32605

Title: VP ( ) Delete  
Name: THURSBY, GENE R  
Address: PO BOX 13795  
City-St-Zip: GAINESVILLE, FL 32604

Title: T ( ) Delete  
Name: HORNBERGER, ROBERT H  
Address: 4056 NW 23 CIR.  
City-St-Zip: GAINESVILLE, FL 32605

Title: D ( ) Delete  
Name: BATES, JO  
Address: 2807 NW 83RD ST, COTTAGE 12  
City-St-Zip: GAINESVILLE, FL 32605

Title: D ( ) Delete  
Name: OLIVER, LULA  
Address: 7701 NW 40TH AVE.  
City-St-Zip: GAINESVILLE, FL 32605

Title: D ( ) Delete  
Name: YATES, CHARLOTTE  
Address: 401 NW 48TH BLVD.  
City-St-Zip: GAINESVILLE, FL 32607

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: SAWYER, HERBERT  
Address: 4415 NW 33RD CT  
City-St-Zip: GAINESVILLE, FL 32606

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: HANRAHAN, MARY ELLEN  
Address: 3703 NW 16TH PL  
City-St-Zip: GAINESVILLE, FL 32605

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: GAGER, WILLIAM  
Address: 2616 SW 4TH PL  
City-St-Zip: GAINESVILLE, FL 32607

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: NELSON M. GRIFFITHS

P

07/23/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date