

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 630830

**Entity Name:** HIGHLANDS CREMATORY, INC.

**Current Principal Place of Business:**

111 E. CIRCLE ST.  
AVON PARK, FL 33825

**Current Mailing Address:**

PO BOX 193  
SEBRING, FL 33871-0193 US

**FEI Number:** 59-1961482

**Certificate of Status Desired:** No

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

NELSON, CHRIS T  
111 E. CIRCLE ST.  
AVON PARK, FL 33825 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name NELSON, CHRIS T  
Address 111 E. CIRCLE ST.  
City-State-Zip: AVON PARK FL 33825

Title V  
Name NELSON, BRENDA J  
Address 111 E. CIRCLE ST.  
City-State-Zip: AVON PARK FL 33825

Title ST  
Name NELSON, CRAIG M  
Address 111 E. CIRCLE ST.  
City-State-Zip: AVON PARK FL 33825

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CRAIG M NELSON

**SECRETARY**

**01/16/2023**

Electronic Signature of Signing Officer/Director Detail

Date