

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000018933

**Entity Name:** CREMATION CARE PROVIDERS OF CENTRAL FLORIDA, LLC

**Current Principal Place of Business:**

1210 NE 15TH STREET  
UNIT 20  
FORT LAUDERDALE, FL 33304

**Current Mailing Address:**

1210 NE 15TH STREET  
UNIT 20  
FORT LAUDERDALE, FL 33304 US

**FEI Number:** 81-5151377

**Certificate of Status Desired:** No

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

GY CORPORATE SERVICES INC.  
777 S. FLAGLER DR.  
STE 500E  
WEST PALM BEACH, FL 33401 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:** JOY FLEDELIUS

03/31/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name HERITAGE MEMORIAL GROUP LLC  
Address 1210 NE 15TH STREET  
UNIT 20  
City-State-Zip: FORT LAUDERDALE FL 33304

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JOY FLEDELIUS

**AUTHORIZED PERSON**

03/31/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date