2007 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # 128145 1. Entity Name GEORGE H. HEWELL AND SON FUNERAL HOMES, INC. Principal Place of Business Mailing Address **4747 MAIN ST** 4747 MAIN ST. JACKSONVILLE, FL 32206-1439 JACKSONVILLE, FL 32206-1439 DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent HEWELL, GEORGE H 4140 SOUTH UNIVERSITY BOULEVARD JACKSONVILLE, FL 32216 8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE

FILED Feb 06, 2007 08:00 AM **Secretary of State**



02052007	No Chg-P	CR2E034 (11/05)			
4. FEI Number	E40		Applied For		
59-0317	54U		Not Applicable		
5. Certificate of	f Status Desired		\$8.75 Additional Fee Required		
	NOT W HIS SP				

Signature: typed or printed name of registered agent and lattle if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Finant Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	1/00000624611 02/14/07-80043-004 150.00		
10.	OFFICERS AND DIREC	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD HEWELL, GEORGE H II 7844 FEATHER OAKS DR JACKSONVILLE, FL 32277						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPSD HEWELL, SUSAN 7844 FEATHER OAKS DR JACKSONVILLE, FL 32277						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			i	IN ⁻	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental 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 ecciver or trustee empoyered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11 if							