

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 317162

1. Entity Name  
**FUNERAL SERVICES, INC.**

**FILED**  
**Apr 13, 2001 8:00 am**  
**Secretary of State**

04-13-2001 90012 022 \*\*\*150.00

Principal Place of Business

Mailing Address

**1200 THOMASVILLE RD.  
TALLAHASSEE FL 32303**

**P.O. BOX 13407  
TALLAHASSEE FL 32317**

80046013



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1205307**

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**IRWIN, HARRIET C  
1200 THOMASVILLE RD.  
TALLAHASSEE FL 32303**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

**FILE NOW!!! FEE IS \$150.00  
After MAY 1, 2001 Fee will be \$550.00  
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

TITLE ☐ Delete  
NAME **D**  
STREET ADDRESS **TOALE, DAVID V.**  
CITY-ST-ZIP **40 N. ORANGE AVENUE  
SARASOTA FL**

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME **VCOB**  
STREET ADDRESS **QUATTLEBAUM, G. EARL**  
CITY-ST-ZIP **1201 S. OLIVE AVENUE  
WEST PALM BEACH FL**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME **COBD**  
STREET ADDRESS **BEGGS, ASHLEY P.**  
CITY-ST-ZIP **301 N. ORANGE STREET  
MADISON FL**

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Delete  
NAME **VCIO**  
STREET ADDRESS **SKINNER, J. ROBIN**  
CITY-ST-ZIP **1200 THOMASVILLE ROAD  
TALLAHASSEE FL 32303**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME **D**  
STREET ADDRESS **STANFILL, STEVE L.**  
CITY-ST-ZIP **10545 S. DIXIE HIGHWAY  
MIAMI FL**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME **PT**  
STREET ADDRESS **IRWIN, HARRIET**  
CITY-ST-ZIP **1200 THOMASVILLE ROAD  
TALLAHASSEE FL**

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-9-01

Date

850-425-1340

Daytime Phone #

CR2E034 (10/00)

Attachment

Doc. # 317162  
A0047679

PROFIT  
CORPORATION  
ANNUAL REPORT  
YEAR: 2001

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DOCUMENT # 317162

1. Corporation Name:  
FUNERAL SERVICES, INC.

2. Principal Place of Business:

FUNERAL SERVICES, INC.  
1200 Thomasville Road  
Tallahassee, FL 32303

2a. Mailing Address:

P.O. Box 13407  
Tallahassee, FL 32317

3. Date Incorporated or Qualified:

5/23/67

4. FEI Number:

59-1205307

9. Name and Address of Current Registered Agent:

Irwin, Harriet C.  
1200 Thomasville Road  
Tallahassee, FL 32303

12. OFFICERS AND DIRECTORS:

Title	D	<input type="checkbox"/> DELETE
Name	TOALE, DAVID V.	
St. Address	40 N. Orange Avenue	
City-St-Zip	Sarasota, FL 34236	
Title	VCOB/D	<input type="checkbox"/> DELETE
Name	QUATTLEBAUM, EARL	
St. Address	1201 S. Olive Avenue	
City-St-Zip	West Palm Beach, FL	
Title	P	<input type="checkbox"/> DELETE
Name	IRWIN, HARRIET	
St. Address	1200 Thomasville Road	
City-St-Zip	Tallahassee, FL 32303	
Title	COBD	<input type="checkbox"/> DELETE
Name	BEGGS, ASHLEY P.	
St. Address	301 N. Orange Street	
City-St-Zip	Madison, FL 32340	
Title	D	<input type="checkbox"/> DELETE
Name	Black, Joanne H.	
St. Address	103 Broadway	
City-St-Zip	Daytona Beach, FL 32018	

13. ADDITIONS/CHANGES & DIRECTORS IN 12

Title	CBOD/D	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
Name			
St. Address			
City-St-Zip			
Title		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
Name			
St. Address			
City-St-Zip			
Title	P/D/T	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
Name			
St. Address			
City-St-Zip			
Title	D	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
Name			
St. Address			
City-St-Zip			
Title		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
Name			
St. Address			
City-St-Zip			

  
Harriet C. Irwin, Registered Agent

Date: 4-9-01

(850) 425-1340

Attachment

PROFIT  
CORPORATION  
ANNUAL REPORT  
YEAR: 2001

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A047699

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1. Corporation Name:  
FUNERAL SERVICES, INC.

Title	D	<input type="checkbox"/> DELETE	Title	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
Name	Brown, Charles M.		Name		
St. Address	5624 26th Street W.		St. Address		
City-St-Zip	Bradenton, FL 34207		City-St-Zip		
Title	D	<input type="checkbox"/> DELETE	Title	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
Name	Farley, David, P.		Name		
St. Address	265 South Nokomis Avenue		St. Address		
City-St-Zip	Venice, FL 34285		City-St-Zip		
Title	D	<input type="checkbox"/> DELETE	Title	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
Name	Ralph, Judith C.		Name		
St. Address	7001 Northwest 4th St.		St. Address		
City-St-Zip	Plantation, FL 33317		City-St-Zip		
Title	D	<input type="checkbox"/> DELETE	Title	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
Name	Roberson, Kenneth L.		Name		
St. Address	2151 Tamiami Trail		St. Address		
City-St-Zip	Port Charlotte, FL 33592		City-St-Zip		
Title	D	<input type="checkbox"/> DELETE	Title	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
Name	STANFILL, STEVE L.		Name		
St. Address	10545 South Dixie Highway		St. Address		
City-St-Zip	Miami, FL 33156		City-St-Zip		
Title	AVP/S	<input type="checkbox"/> DELETE	Title	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
Name	Whitfield, Meiko H.		Name		
St. Address	1200 Thomasville Road		St. Address		
City-St-Zip	Tallahassee, FL 32303		City-St-Zip		
Title	VP	<input type="checkbox"/> DELETE	Title	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Name	Williams, Jr., William H.		Name		
St. Address	1200 Thomasville Road		St. Address		
City-St-Zip	Tallahassee, FL 32303		City-St-Zip		
Title	VCIO	<input checked="" type="checkbox"/> DELETE	Title	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
Name	Skinner, J. Robin		Name		
St. Address	1200 Thomasville Road		St. Address		
City-St-Zip	Tallahassee, FL 32303		City-St-Zip		

  
Harriet C. Irwin, Registered Agent

Date: 4-9-01

(850) 425-1340