

03-19-2003 90120 008 ***160.00

**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 317162
 1. Entity Name
FUNERAL SERVICES, INC.



90056593

Principal Place of Business
 1200 THOMASVILLE RD.
 TALLAHASSEE, FL 32303

Mailing Address
 P.O. BOX 13407
 TALLAHASSEE, FL 32317

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
 City & State

Zip Country Zip Country



CHECK HERE IF MAKING CHANGES

4. FEI Number **59-1205307** Applied For Not Applicable

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

6. Name and Address of Current Registered Agent
 IRWIN, HARRIET C
 1200 THOMASVILLE RD.
 TALLAHASSEE, FL 32303

7. Name and Address of New Registered Agent
 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. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE *[Signature]* DATE **3-17-03**

Signature, typed or printed name of registered agent and date of application. (NOTE: Registered Agent's signature required when withdrawing)

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CBOD TOALE, DAVID V 40 N. ORANGE AVENUE SARASOTA, FL 34236 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCOB QUATTLEBAUM, EARL 1201 S. OLIVE AVE. WEST PALM BEACH, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDT IRWIN, HARRIET 1200 THOMASVILLE ROAD TALLAHASSEE, FL 32303 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BEGGS, ASHLEY P 301 N. ORANGE STREET MADISON, FL 32340 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BLACK, JOANNE H 103 BROADWAY DAYTONA BEACH, FL 32018 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, CHARLES M 5624 26TH STREET W. BRADENTON, FL 34207 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* DATE **3-17-03** ⁸⁵⁰⁻ **425-1340**

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Mailing Phone #

CR2EC04 (10/02)

ATTACHMENT

90056593

DOC # 317162

PROFIT CORPORATION ANNUAL REPORT YEAR: 2003

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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

3. Mailing Address: P.O. Box 13407 Tallahassee, FL 32317

4. FEI Number: 59-1205307

6. Name and Address of Current Registered Agent: Irwin, Harriet C. 1200 Thomasville Road Tallahassee, FL 32303

7. Name and Address of New Registered Agent: Name Williams, Jr., William H. Address 1200 Thomasville Road City Tallahassee State FL Zip 32303

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 [Signature] Date 3-17-03

10. OFFICERS AND DIRECTORS:

11. ADDITIONS/CHANGES & DIRECTORS IN 11

Title CBOD Name TOALE, DAVID V. St. Address 40 N. Orange Avenue City-St-Zip Sarasota, FL 34236

[] DELETE Title CBOD/D [X] Change [] Addition Name St. Address City-St-Zip

Title VCOB Name QUATTLEBAUM, EARL St. Address 1201 S. Olive Avenue City-St-Zip West Palm Beach, FL

[] DELETE Title VCOB/D [X] Change [] Addition Name St. Address City-St-Zip

Title P/D/T Name IRWIN, HARRIET St. Address 1200 Thomasville Road City-St-Zip Tallahassee, FL 32303

[] DELETE Title D/CEO/SECRETARY [X] Change [] Addition Name St. Address City-St-Zip

Title D Name BEGGS, ASHLEY P. St. Address 301 N. Orange Street City-St-Zip Madison, FL 32340

[] DELETE Title Name [] Change [] Addition St. Address City-St-Zip

Title D Name Black, Joanne H. St. Address 103 Broadway City-St-Zip Daytona Beach, FL 32018

[] DELETE Title Name [] Change [] Addition St. Address City-St-Zip

[Signature] William H. Williams, Jr., Registered Agent

Date: 3-17-03

(850) 425-1340

ATTACHMENT

90056593

Doc # 317162

PROFIT CORPORATION ANNUAL REPORT YEAR: 2003

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1. Corporation Name: FUNERAL SERVICES, INC.

Title D [X] DELETED Title [] Change [] 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 [] DELETED Title [] Change [] 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 [] DELETED Title [] Change [] 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 [] DELETED Title [] Change [] 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 [X] DELETED Title [] Change [] 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 [] DELETED Title AVP [X] Change [] Addition Name Whitfield, Meiko H. Name St. Address 1200 Thomasville Road St. Address City-St-Zip Tallahassee, FL 32303 City-St-Zip

Title VP [] DELETED Title P/D/T [X] Change [] Addition Name Williams, Jr., William H. Name St. Address 1200 Thomasville Road St. Address City-St-Zip Tallahassee, FL 32303 City-St-Zip

Title [] DELETED Title D [] Change [X] Addition Name Andrew J. Hafer Name St. Address 600 North West Shore Blvd, Suite 800 St. Address City-St-Zip Tampa, FL 33609 City-St-Zip

Title [] DELETED Title D [] Change [X] Addition Name Dolores A. Garcia Name St. Address 201 E. Kennedy Boulevard, Suite 1800 St. Address City-St-Zip Tampa, FL 33602 City-St-Zip

[Signature] William H. Williams, Jr., Registered Agent

Date: 3-17-03 (850) 425-1340