

2002 UNIFORM BUSINESS REPORT (UBR)

001243 AV

DOCUMENT # 502319

1. Entity Name
VOLUSIA COUNTY CREMATION SOCIETY, INC.

Principal Place of Business
1425 BELLEVUE AVE.
DAYTONA BEACH FL 32114

Mailing Address
1425 BELLEVUE AVE.
DAYTONA BEACH FL 32114

FILED

02 JUN -5 PM 1:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address % Holland & Knight, LLP

Attn: George B. Howell, III

Suite, Apt. #, etc.
400 N. Ashley Dr., Suite 2300

City & State
Tampa, FL

DO NOT WRITE IN THIS SPACE

Zip
33602

Country
Hillsborough

4. FEI Number 59-2503437

Applied For
Not Applicable

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

THOMPSON, CHRISTINE S
2227 MAGNOLIA AVE.
SOUTH DAYTONA FL 32119

Name James T. Stephens c/o Holland & Knight, LLP
Attn: George B. Howell, III

Street Address (P.O. Box Number is Not Acceptable)
400 N. Ashley Dr., Suite 2300

City
Tampa

FL

Zip Code
33602

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

James T. Stephens, Receiver James T. Stephens 5/25/02

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, 2002 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 IN 11

TITLE P
NAME
STREET ADDRESS 1428 BELLEVUE AVENUE
CITY-ST-ZIP DAYTONA BEACH FL 32114 ☐ Delete

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

TITLE S
NAME
STREET ADDRESS 1428 BELLEVUE AVENUE
CITY-ST-ZIP DAYTONA BEACH FL 32114 ☐ Delete

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

TITLE R
NAME
STREET ADDRESS 1425 BELLEVUE AVENUE
CITY-ST-ZIP DAYTONA BEACH FL 32114 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE Receiver
NAME James T. Stephens
STREET ADDRESS c/o Holland & Knight, LLP
CITY-ST-ZIP Attn: George B. Howell, III ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP 400 North Ashley Drive Suite 2300 Tampa, FL 33602 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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

Date

Daytime Phone #

CR2E034 (9/01)