

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT

1994 1996



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

Mar 11 1996 8:00 am

Secretary of State

1. Corporation Name CARTHAGE CHAPEL FUNERAL HOME, INC.	DOCUMENT # 667467 (5)
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Mailing Address 929 WEST BEAVER STREET C/O KENNETH PEELE JACKSONVILLE FL 32204	Principal Place of Business 929 WEST BEAVER STREET C/O KENNETH PEELE JACKSONVILLE FL 32204
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If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. Mailing Address 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Principal Place of Business 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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3. Date Incorporated or Qualified 04/22/1980	3a. Date of Last Report 03/10/1993
4. FEI Number 59-1997104	Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required <input checked="" type="checkbox"/>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Nonprofit Exempt from \$138.75 Supplemental Fee <input type="checkbox"/>	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No

DO NOT WRITE IN THIS SPACE

9. Name and Address of Current Registered Agent PEELE, GERTRUDE H 4336 ROTH DRIVE SOUTH 929 W. BEAVER STREET JACKSONVILLE FL 32204
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10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505 or 617.0503, Florida Statutes.

SIGNATURE: *[Signature]* DATE: 2-28-1996

12. OFFICERS AND DIRECTORS	13. CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP
S/T PEELE, SHARON L 4336 ROTH DRIVE, SOUTH JACKSONVILLE FL P PEELE, GERTRUDE H. 4336 ROTH DRIVE, SOUTH JACKSONVILLE FL V/P PEELE, KENNETH, JR. 1234 TURTLE CREEK DR N. JACKSONVILLE FL D PEELE-PITTS GAYLE D 3339 FRANKLIN AVENUE COCONUT GROVE FL	NO CHANGE DELETE PRESIDENT PEELE, KENNETH, JR. 1234 TURTLE CREEK DR. N. JACKSONVILLE, FL 32218 VICE PRESIDENT PEELE-PITTS GAYLE 3339 FRANKLIN AVENUE COCONUT GROVE, FL 33133 400001739524 -03/12/96--01039--014 ***208.75

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made by me in person; that I have fulfilled all obligations concerning unclaimed property imposed by Chapter 717, Florida Statutes; 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 or Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* 2-28-1996 (904) 354-0545