2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 1. Entity Name

676521

BUXTON FUNERAL HOME, INC.



FILED May 13, 2003 8:00 am Secretary of State 05-13-2003 90044 019 ***150.00



			V	COO WE THE				
Principal Plac	ce of Business	Mailing Address]			
502 N. PARRO		502 N. PARROTT AVENUE	E					
OKEECHOBEE	E FL 34972	OKEECHOBEE FL 34972						
					1 10 10 10 10 10 10 10 10 10 10 10 10 10	 		11811 21811 1281
,	Place of Business	3. Mailing Address					1 4)411 1111)	EIRN BION 1704
110 N	E 5th Street	110 NE 5th	Stree	et				
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			IXI CHECK HER	E IE MAKING C	LIANGES	
		· ·			M CHECK HER	E IF MAKING C	PHANGES	
City & Stat	te	City & State			4. FEI Number EQ-001000)n	Ar	pplied For
Okeec	hobee, Florida	Okeechobee,	Flor	ida	59-201023	99	No	ot Applicable
Zip	Country	Zip	Country		5. Certificate of Status Desired	, p	8.75 Add	ditional
34	97-2	34972			5. Certificate of Status Desired		e Require	
	6. Name and Address of Current	Registered Agent			7. Name and Address of New	Registered Ag	ent	
<u> </u>	,	•		Name				
BUXTON,	PAUL M.		<u> </u>	Stroot Addrson /	DO Bay Number in Not Assertal	nio)		
502 N. PA	arrott avenue		Street Address (P.O. Box Number 110 NE 5th Stre			ore)		
1	OBEE FL 34972							
ONLEON	00LE E 070/E							
				Okeecho	hee .	FL	Zip Cod	le 372
8 The above	e named entity submits this statement for	r the numose of changing its	registered	office or register	ed agent or both in the State of			
	tions of registered agent.	purpose or enanging its	ogiateleti i	omee or register	ss agent, or both, in the state of .	nonda. Falli idi	ningai syrul,	ωτό αυσέρι
·	ů ů							
SIGNATURE .								
·	Signature, typed or printed name of registered agent	and title if applicable. (NOTi	E: Registered Ag	gent signature required	when reinstating)	DATE		
Fl	ILE NOW!!! FEE IS \$150.00					-	A E 0	
After	r May 1, 2003 Fee will be \$550.00				 Election Campaign I Trust Fund Contribut 	· -	\$5.0	0 May Be
Make Check	k Payable to Florida Department o	f State			must Fund Continbu	tion.	Added	J to rees
10.	OFFICERS AND	DIRECTORS	11.	,	ADDITIONS/CHANGES TO O	FFICERS AND D	IRECTOR	S IN 11
10. TITLE			11.		ADDITIONS/CHANGES TO O	_		S IN 11
	PTD	DIRECTORS Delete	-		ADDITIONS/CHANGES TO O	_		
TITLE			TITLE	ADDRESS	ADDITIONS/CHANGES TO O	_		
TITLE NAME	PTD BUXTON, PAUL M.		TITLE NAME		ADDITIONS/CHANGES TO O	_		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD BUXTON, PAUL M. 2517 SW 22ND CIRCLE OKEECHOBEE FL 34974	☐ Delete	TITLE NAME STREET A CITY-ST		ADDITIONS/CHANGES TO O	[_ Change	Addition
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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.

TAROU Marilyn A. Buxton

04/29/03

(863) 763-1994

Daytime Phone #