

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 15 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 691031 (9)
1. Corporation Name
TURNER FUNERAL HOMES, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 504 JEFFERSON ST PO BOX 1538 BROOKSVILLE FL 34605-8538		Mailing Address 504 E JEFFERSON STR PO BOX 1538 BROOKSVILLE FL 34605-8538 US	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 1201 S. Orlando Ave 27 Suite, Apt. #, etc. 28 Suite 365 29 City & State 30 Winter Park FL 31 Zip 32 32789 33 Country 34 USA	

3. Date Incorporated or Qualified 06/19/1981	
4. FEI Number 59-2109540	Applied For Not Applicable
5. Certificate of Status Desired 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	☐ \$8.75 Additional Fee Required ☐ \$5.00 May Be Added to Fees ☐ Yes ☐ No

9. Name and Address of Current Registered Agent TURNER, JOHN, S 24198 WESTMINSTER CT BROOKSVILLE FL 34601		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	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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, Florida Statutes.

SIGNATURE *Keenan L. Knopke* 4.20.98
Signature, typed or printed name of registered agent and if applicable (NOTE: Registered Agent signature required when reinstalling) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO TURNER, JOHN S 24198 WESTMINSTER CT BROOKSVILLE FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	P/AS Keenan L. Knopke 1201 S. Orlando Ave., # 365 Winter Park, FL 32789
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CORN, THOMAS, G 24478 MAE HIGHT RD BROOKSVILLE FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	D/VP/AS Brent F. Heffron 1201 S. Orlando Ave., Ste. 365 Winter Park, FL 32789
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SDT TURNER, DIANE S. 24198 WESTMINSTER CT BROOKSVILLE FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	S Corinne I. Olvey 1201 S. Orlando Ave., Ste. 365 Winter Park, FL 32789
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	T Frank L. Matasavage 1201 S. Orlando Ave., Ste. 365 Winter Park, FL 32789
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS Ronald H. Patron 110 Veterans Memorial Blvd. Metairie, LA 70005	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	D William E. Rowe 110 Veterans Memorial Blvd. Metairie, LA 70005
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS Kenneth C. Budde 110 Veterans Memorial Blvd. Metairie, LA 70005	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	D Joseph P. Henican, III 110 Veterans Memorial Blvd. Metairie, LA 70005

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *Corinne I. Olvey* 4-22-98 407/740-7000

CR2E034 (10/97)