

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 727898

1. Entity Name

SUNNY HILLS CHAPEL OF SUNNY HILLS, INC.

FILED
Mar 20, 2002 8:00 am
Secretary of State

03-20-2002 90049 010 ****61.25

0062741

Principal Place of Business C/O JESSIE OWENS 4311 HWY 77 CHIPLEY FL 32428 US	Mailing Address C/O JESSIE OWENS 4311 HWY 77 CHIPLEY FL 32428 US
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80045741



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-2444782	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent HOLMER, WILLIAM E 721 BRIDGEYARD ROAD CHIPLEY FL 32428		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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	(NOTE: Registered Agent signature required when reinstating)	DATE
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FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOHNS, BILLY P.O. BOX 145 FOUNTAIN FL 32438 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD LED MADDOX 3120 EAST AVE PANAMA CITY FL 32405 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T OWENS, JESSIE ROUTE 4, HIGHWAY 77 CHIPLEY FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HENRY ROGERS 6437 BUCKINGHAM DR YOUNGSTOWN FL 32466 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SNOWDEN, J.A. 1586 LEDGER RD CHIPLEY FL 32428 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BRADIE MADDOX 3120 EAST AVE PANAMA CITY FL 32405 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JOHNS, JUANITA P.O. BOX 138 N/A FOUNTAIN FL 32438 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD JOHNS, MARTIN E P.O. BOX 1188 N/A FOUNTAIN FL 32438 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. 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 617, 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: Jessie Owens 3-7-2002

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/01)