

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

0020131

FILED
May 01, 1999 8:00 am
Secretary of State

05-01-1999 90095 047 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # F08289
 1. Corporation Name
 CAESAR'S FUNERAL HOME, INC.

Principal Place of Business Mailing Address
 726 E. DR. L. KING. DR. PO BOX 85
 PO BOX 85 726 E DR M L KING
 LAKE CITY FL 32056-7085 LAKE CITY FL 32055
 US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address
 21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
 22 City & State 27 City & State
 23 Zip Country 28 Zip Country
 24 25 29 30

3. Date Incorporated or Qualified
 12/01/1980
 4. FEI Number Applied For
 59-1944839 Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required
 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
 8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent
 CAESAR, ALYCE J
 726 E. DR M.L.K. JR DR
 LAKE CITY FL 32055

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City FL 85 Zip Code

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 *Alyce J Caesar* (NOTE: Registered Agent signature required when reinstating) DATE 4-28-99

12. OFFICERS AND DIRECTORS

TITLE	V	<input type="checkbox"/> DELETE
NAME	GALLOWAY, RENTZ T	
STREET ADDRESS	RT 1 BOX 448	
CITY-ST-ZIP	LAKE CITY FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	JONES, ELLA MAE	
STREET ADDRESS	2316 LAKE DR	
CITY-ST-ZIP	LAKE CITY FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	CATER, BILLIE	
STREET ADDRESS	RT 8 BOX 472	
CITY-ST-ZIP	LAKE CITY FL	
TITLE	P	<input type="checkbox"/> DELETE
NAME	CEASAR, ALYCE J	
STREET ADDRESS	726 E. DR. M.L. KING JR. DR	
CITY-ST-ZIP	LAKE CITY FL	
TITLE	SV	<input type="checkbox"/> DELETE
NAME	ANDERS, RICHARD	
STREET ADDRESS	1072 W JEFFERSON ST	
CITY-ST-ZIP	LAKE CITY FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	ANDERS, RICHARD H	
STREET ADDRESS	1072 W. JEFFERSON ST	
CITY-ST-ZIP	LAKE CITY FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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, with all other like empowered.

SIGNATURE: *Alyce J Caesar* DATE: 4-28-99 DAYTIME PHONE #: 904 752 5413

CR2E034 (11/98)