

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **F49815** (6)

1. Corporation Name

**PHIL KISER FUNERAL HOME INC.**



Principal Place of Business

**9231 CYPRESS LAKE DR  
FT MYERS FL 33919**

Mailing Address

**4126 NORLAND AVE.  
BURNABY BC V5G3S-8**

3. Date Incorporated or Qualified  
**11/01/1981**

3a. Date of Last Report  
**04/25/1995**

4. FEI Number

**59-2125429**

Applied For  
☐ 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 has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

**V5G 3S8**

30 Country

**CANADA**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324**

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

Signature, typed or printed name of registered agent, and date if applicable

(40%) Registered Agent signature required when registering

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE  
NAME **P**  
**HEATH, ROBERT E.**  
STREET ADDRESS **9231 CYPRESS LAKE DR.**  
CITY-ST-ZIP **FT. MYERS FL**

TITLE ☐ DELETE  
NAME **D**  
**LOEWEN, RAYMOND L.**  
STREET ADDRESS **4126 NORLAND AVE.**  
CITY-ST-ZIP **BURNABY B.C. CANADA**

TITLE ☐ DELETE  
NAME **DST**  
**HYNDMAN PETER S.**  
STREET ADDRESS **4126 NORLAND AVE.**  
CITY-ST-ZIP **BURNABY BC V5G3S-8**

TITLE ☐ DELETE  
NAME **VD**  
**GLODEK, TOM**  
STREET ADDRESS **230-13TH AVE., N.E.**  
CITY-ST-ZIP **MINNEAPOLIS MN**

TITLE ☐ DELETE  
NAME **A**  
**SWANSON RICK**  
STREET ADDRESS **12777 STATE ROAD 82**  
CITY-ST-ZIP **FORT MYERS FL 33913**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP **ZIP = 33919**

2.1 TITLE ☒ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP **ZIP = V5G 3S8**

3.1 TITLE ☒ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP **ZIP = V5G 3S8**

4.1 TITLE ☒ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP **ZIP = 55413**

5.1 TITLE ☒ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP **400001794754**  
**-04/25/96--01071--022**

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP **\*\*\*200.00**

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 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 an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PETER S. HYNDMAN MARCH 19, 1996 (604) 299-9321

CR2E034 (12/95)