

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

FILED

Apr 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # G77124 (7)
1. Corporation Name
SHERRILL-GUERRY FUNERAL HOME, INC.



Principal Place of Business
616 S. MARION STREET
LAKE CITY FL 32055
US

Mailing Address
4126 NORLAND AVE.
BURNABY BC V5G3G
CA

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

3. Date Incorporated or Qualified
01/03/1984

3a. Date of Last Report
04/25/1996

4. FEI Number
59-2471876

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

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
P	GUERRY, THEODORE L., JR.	616 S. MARION ST.	LAKE CITY FL 32056	<input type="checkbox"/>
PVAS	RUSSELL, ROBERT D	200 NORTH FEDERAL HWY.	POMPANO BEACH FL 33062	<input type="checkbox"/>
D	LOEWEN, RAYMOND L	4126 NORLAND AVE.	BURNABY BC V5G-3S8	<input type="checkbox"/>
DAS	HYNDMAN, PETER S	4126 NORLAND AVE.	BURNABY BC V5G-3S8	<input type="checkbox"/>
ST	WRIGHT GARY L.	800-50 EAST RIVERCENTER BLVD.	COVINGTON KY 41011	<input checked="" type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	Change	Addition
1.1	1.2	1.3	1.4	1.5	<input type="checkbox"/>	<input type="checkbox"/>
2.1	2.2	2.3	2.4	2.5	<input type="checkbox"/>	<input type="checkbox"/>
3.1	3.2	3.3	3.4	3.5	<input type="checkbox"/>	<input type="checkbox"/>
4.1	4.2	4.3	4.4	4.5	<input type="checkbox"/>	<input type="checkbox"/>
5.1	5.2	5.3	5.4	5.5	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6.1	6.2	6.3	6.4	6.5	<input type="checkbox"/>	<input type="checkbox"/>

14. I do 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:

SIGNATURE: [Signature]

4/22/97

(604) 293-6425

CR2E034 (9/96)