

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 29, 2007 8:00 am
Secretary of State

01-29-2007 90073 021 ***158.75

DOCUMENT # G98249

1. Entity Name

NIXON FUNERAL SERVICE, INC.



Principal Place of Business

425B W. DANIA BEACH BLVD.
P. O. BOX 1816
DANIA FL 33004

Mailing Address

425B W. DANIA BEACH BLVD.
P. O. BOX 1816
DANIA FL 33004



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/06)

4. FEI Number 59-2399009

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

INMAN, ROBERT J
4428 WORTHINGTON CIRCLE
PALM HARBOR FL 34685

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME NIXON, JERROLD R.
STREET ADDRESS 500 N. E. 2ND ST. #419
CITY ST ZIP DANIA, FL 33004
☐ Delete
**SEE CHANGE
OF ADDRESS....**

TITLE PD
NAME JERROLD R. NIXON
STREET ADDRESS 109 S.E. 2ND ST.
CITY ST ZIP DANIA BEACH, FL 33004
☐ Change ☐ Addition

TITLE VD
NAME INMAN, ROBERT J.
STREET ADDRESS 4428 WORTHINGTON CIRCLE
CITY ST ZIP PALM HARBOR FL 34685
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
☐ Change ☐ Addition

TITLE STD
NAME NIXON, MARILYN
STREET ADDRESS 3829 DARSTON STREET
CITY ST ZIP PALM HARBOR FL 34685
☐ Delete

TITLE
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STREET ADDRESS
CITY ST ZIP
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE:

Jerrold R. Nixon

JERROLD R. NIXON, PRES

JAN.22,2007 954-922-5102

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #