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

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP

LINGUYO TIME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H01327

(6)

BELLEVUE - CEDAR HILL MEMORY GARDENS FUNERAL HOM E, INC.

Principal Place of Business Mailing Address C/O MARILYN TIMMER C/O MARILYN TIMMER 1425 BELLEVUE AVENUE 1425 BELLEVUE AVENUE DAYTONA BEACH FL 32114-3938 DAYTONA BEACH FL 32114-3938 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/01/1984 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2504001 Not Applicable 26 Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional প 5, Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6, Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Žip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. X Yes □ No 29 30 10. Name and Address of New Registered Agent g. Name and Address of Current Registered Agent Name TIMMER, MARILYN 1425 BELLEVUE AVE. Street Address (P.O. Box Number is Not Acceptable) **DAYTONA BEACH FL 32114** 83 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 repertered agent and title diapplicable [NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Addition DELETE 1.1 TITLE Change TITLE TIMMER, WILLARD I. 1.2 NAME NAME 1425 BELLEVUE AVE. 1.3 STREET ADDRESS STREET ADDRESS DAYTONA BCH. FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE TIMMER, MARILYN J. 2.2 NAME 1425 BELLEVUE AVE. STREET ADDRESS 2.3 STREET ADDRESS DAYTONA BCH. FL 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ■ Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP ☐ Change DELETE Addition 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Addition DELETE Change 6.1 TITLE TITLE NAME 6.2 NAME 63 STREET ADDRESS 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 suppliemental 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.

7-11-00

FILED

May 12 1998 8:00am

Secretary of State