## 2005 FOR PROFIT CORPARATION ANNUAL REPORT

changed, or on an attachment with an address, with

SIGNATURE:

## Jan 07, 2005 08:00 AM DOCUMENT # H35512 **Secretary of State** 1. Entity Name SOUTHEASTERN FUNERAL DIRECTORS SERVICE, INC. Principal Place of Business Mailing Address BOX 19244 103 CENTRY 21 DR 220 SPRINGFIELD, IL 62794 US JACKSONVILLE, FL 32216 US 01042005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2471119 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE RODENBURG, JOHN R 103 CENTRY 21 DR ... **STE 220** IN THIS SPACE JACKSONVILLE, FL 32207 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 1/5/2005 (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOWN FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10, TITLE DAVIS, LARRY NAME U00000173291 103 CENTURY 21 DR., STE 220 STREET ADDRESS 01/07/05-80014-001 150.00 CITY-ST-ZIP JACKSONVILLE, FL 32216 TDP TITLE RODENBURG, JOHN NAME 103 CENTRY 21 DR/STE 220 STREET ADDRESS JACKSONVILLE, FL 32216 CITY-ST-ZIP DS TITLE RODENBURG, KENNETH NAME 103 CENTURY 21 DR STE 220 STREET ADDRESS DO NOT WRITE JACKSONVILLE, FL 32216 CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 12. 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 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

FILED