

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2003 8:00 am
Secretary of State

02-13-2003 90265 037 ***150.00

DOCUMENT # J40444

1. Entity Name

ARCHIE TANNER FUNERAL HOME, INC.



Principal Place of Business

ROUTE 6 BOX 1519
STARKE FL 32091

Mailing Address

ROUTE 6 BOX 1519
STARKE FL 32091

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2749323

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

TANNER, ARCHIE M
ROUTE 6 BOX 1519
STARKE FL 32091

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, 2003 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 ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
TANNER, ARCHIE M
ROUTE 6 BOX 1519
STARKE FL 32091

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ARCHIE M. TANNER

2-11-2003

904-964-5752

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)



Attachment
90025563
J40444

September 24, 2002

ARCHIE TANNER FUNERAL HOME
ROUTE 6 BOX 1519
STARKE, FL 32091

Dear Postal Customer:


Your local government, Bradford County, has informed the Postal Service that your address has been changed in conjunction with the E9-1-1 Program for providing emergency services. The Postal Service fully supports this important program and request you use this address as your new mailing address at this time. According to records provided by Bradford County Emergency Services, your new mailing E9-1-1 address is:

14397 US HIGHWAY 301 S

We must ensure postal address files are updated and are accurate so we can provide efficient and consistent mail delivery. You can assist in this effort by notifying all correspondents, as well as government agencies, of your new address and inscribing your correct house number (and street and name if the box is on a different street from the residence) onto your curbside mailbox. Change of address Request Forms (Form 3576) are available at your Post Office.

If you have any questions about your new mailing E9-1-1 address, please contact Bradford County Emergency Services, E9-1-1 Division at (904) 966-6179. Your new address is required for mail delivery and for E9-1-1 Emergency Services.

Sincerely,


Robert Furlough
Postmaster
Starke FL 32091-9998