2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2009
Secretary of State

DOCUMENT# J56001

Entity Name: BROWARD PET CEMETERY, INC.

Current Principal Place of Business:

11455 N.W. 8TH ST.
PLANTATION, FL 33325

New Principal Place of Business:

Current Mailing Address:

11455 N.W. 8TH ST.
PLANTATION, FL 33325

New Mailing Address:

FEI Number: 59-2783282 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SEILER, JOHN P
2850 NORTH ANDREWS AVENUE
FORT LAUDERDALE, FL 33311 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SEILER, JR., EARNEST E DR
Address: 2609 NE 37TH ST
City-St-Zip: FT. LAUDERDALE, FL 33308

Title: VD ( ) Delete
Name: SEILER, ANNE E
Address: 2609 NE 37 ST
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: STD ( ) Delete
Name: SEILER, JOHN P
Address: 2850 N ANDREWS AVE
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: D ( ) Delete
Name: SEILER, E.E. III MD
Address: 568 RIO CASA DRIVE NORTH
City-St-Zip: INDIALANTIC, FL 32903

Title: D ( ) Delete
Name: SEILER COLLAR, KATHERINE
Address: 209 RIPPLING DRIVE
City-St-Zip: MARIETTA, GA 30064

Title: D ( ) Delete
Name: SEILER, LISA ANN
Address: 1279 LANIER BLVD NE
City-St-Zip: ATLANTA, GA 30306

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: SEILER, JR., EARNEST E DVM
Address: 2609 NE 37TH ST
City-St-Zip: FT. LAUDERDALE, FL 33308

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: STD (X) Change ( ) Addition
Name: SEILER, JOHN P
Address: 2850 N ANDREWS AVE
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILSON B. GREATON, JR. ATTY 03/25/2009

Electronic Signature of Signing Officer or Director Date