


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 19, 2005 8:00 am
Secretary of State

08-19-2005 90010 033 ***158.75

| | |
|---|---|
| DOCUMENT # J61615 |  |
| 1. Entity Name SMITH FUNERAL HOME, INCORPORATED | |

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|--|--|
| Principal Place of Business 1534-18TH AVENUE SOUTH ST. PETERSBURG, FL 33705-2542 | Mailing Address 1534-18TH AVENUE SOUTH ST. PETERSBURG, FL 33705-2542 |
|--|--|

50062509



07142005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

| | |
|---|--|
| 4. FEI Number 59-2865547 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

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|--|
| 6. Name and Address of Current Registered Agent SMITH, JEROME B 1534-18TH AVENUE SOUTH ST PETERSBURG, FL 33712 |
|--|

**DO NOT WRITE
IN THIS SPACE**

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: _____ (NOTE: Registered Agent signature required when revalidating) DATE: _____

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PO SMITH, JEROME B. 605-37TH STREET SOUTH ST PETERSBURG, FL |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VO BRAZELTON, SAMUEL 4010 LAUREL STREET TAMPA, FL |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | +D BRAZELTON, ELIZABETH 4010 LAUREL STREET TAMPA, FL |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

**DO NOT WRITE
IN THIS SPACE**

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: *Jerome B. Smith* 7-18-05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



ATTACHMENT

50062509

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

July 28, 2005

SMITH FUNERAL HOME, INCORPORATED
1534-18TH AVENUE SOUTH
ST. PETERSBURG, FL 33705-2542

Subject: **SMITH FUNERAL HOME, INCORPORATED**

Reference Number: **J61615**

Please be advised, we have received your annual report/uniform business report; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The fee to file the enclosed profit annual report/uniform business report is \$150.00. If a certificate of status is desired, please add an additional \$8.75.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

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ANNUAL REPORTS SECTION