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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT # K07899

(3)

NATIONWIDE CEMETERY PROPERTY BROKERS, INC.

Principal Place of Business Mailing Address					
S J.R. WILLIFORD S J.R. WILLIFORD					
28 LAURIE ST.		28 LAURIE ST.			
MELBOURNE F		MELBOURNE FL 32935-673	38		
				 Date Incorporated or Qualified 12/18/1987 	3a. Date of Last Report 07/08/1996
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-2909959	Not Applicable
Suite, Apt.		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	te	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Ζφ 29	Gountry 30	8. This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032. I Yes No
	9. Name and Address of Curren	nt Registered Agent		10. Name and Address of New Re	gistered Agent
	JIFORD, JUNIE YOUNG		81 Name		
	AURIE ST.		82 Street Add	ress (P.O. Box Number is Not Acceptab	
MEL	BOURNE FL 32935				
			63		
			84 City		85 Zip Code
			.		FL "
11. Pursuant office or a	to the provisions of Sections 607.050 registered agent, or both, in the State)2 and 607.1508, Florida Statu -of Florida. Such change was	tes. The above-named corp authorized by the corpora	poration submits this statement for the pation's board of directors. Thereby acception's	urpose of changing its registered of the appointment as registered
agent. I a	am familiar with, and accept the obliga	ations of, Section 6 07. 0 505, Fi	orida Statutes.	,	
SIGNATURE	70.	100	H : Registered Agunt signature requi		
12.	Signature types or presed same of registered age OFFICERS ANI		1 13.	ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIRECTORS IN 12
TITLE	PD	DOLETË	THE TIME		☐ Change ☐ Addition
NAME	WILLIFORD, JUNIE YOUNG J		1.2 NAME		
STREET ADDRESS	28 LAURIE ST		1.3 STREET ADDRESS		
CITY-ST-ZIP	MELBOURNE FL		1.4 CBY - ST - ZIP		
TITLE		DILFTE	2.1 TULE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2 4 CITY - ST - ZIP		
TITLE		DELETE	3 1 101cE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CHTY-ST-ZIP			3.4. CITY: \$1 - 7IP		
TITLE		L_I DELETE	411111[Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 \$1REEL ADDRESS		
CITY-ST-ZIP			4.4 City - \$1 - Zip		
TITLE		DELITE	5.1 Tall#		Change Addition
NAME		· ·	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY OT 7(D	i		5 4 DIEW DE 20		

14. I do 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 supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or true or 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.

6 1 THUE

G 2 NAME

SIGNATURE: Vine VINCEN WILL WAS

TITLE

NAME

STREET ADDRESS

4-10-5

407-724-1949

Change

Addition

FILED

Apr 15 1997 8:00am

Secretary of State