

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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DOCUMENT # **K81976** (8)

1. Corporation Name

BELLEVUE FUNERAL HOME, INC.

Principal Place of Business

5946 SE ROBINSON ROAD
PO BOX 386
BELLVIEW FL 32620

Mailing Address

5946 SE ROBINSON ROAD
PO BOX 386
BELLVIEW FL 32620

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 04/20/1989	3a. Date of Last Report 02/08/1994
4. FEI Number 59-2949449	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business 5946 SE Robinson Rd.	2a. Mailing Address PO Box 386
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.
23. City & State BELLVIEW, FL.	28. City & State BELLVIEW, FLA.
24. Zip 34421	25. Country USA
29. Zip 34421	30. Country USA

9. Name and Address of Current Registered Agent	
MCKEEVER, JOHN P 2100 SE 17TH ST STE 300 OCALA FL 34471	

10. Name and Address of New Registered Agent	
81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	
85. Zip Code	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1608, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (Signature, typed or printed name of registered agent and the date) (NOTE: Registered Agent's signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	☐ Change ☐ Addition
NAME	HIERS, JOHN M.	1.2 NAME	
STREET ADDRESS	5946 SE ROBINSON RD	1.3 STREET ADDRESS	
CITY- ST- ZIP	BELLVIEW FL	1.4 CITY- ST- ZIP	
TITLE	VT	2.1 TITLE	☐ Change ☐ Addition
NAME	BAXLEY, DENNIS K	2.2 NAME	
STREET ADDRESS	5946 SE ROBINSON ROAD	2.3 STREET ADDRESS	
CITY- ST- ZIP	BELLVIEW FL	2.4 CITY- ST- ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY- ST- ZIP		3.4 CITY- ST- ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY- ST- ZIP		4.4 CITY- ST- ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY- ST- ZIP		5.4 CITY- ST- ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY- ST- ZIP		6.4 CITY- ST- ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(c), 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 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 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE: Dennis K. Baxley, Vice President 1/16/95 904-245-2424
 DENNIS K. BAXLEY
 (Signature and typed or printed name of signing officer or director)

LAW OFFICES
PATTILLO & MCKEEVER, P.A.

JEAN A. BICE*
JOHN R. DOROUGH*
DAVID A. GLENNY
BEVERLY A. LAMBERT
BETTY D. MARION†
JOHN P. MCKEEVER
ANDREW G. PATTILLO, JR.*
GARY L. SANDERS

*Board Certified in Civil Trial Law

*Certified Circuit Court Mediator

*Also Admitted in Kentucky

†Also Admitted in Texas

LAUREL RUN PROFESSIONAL CENTER
8100 S.E. 17TH STREET, SUITE 800
OCALA, FLORIDA 34471-4161

POST OFFICE BOX 1450
OCALA, FLORIDA 34478-1450

FAX 904-851-0166
TELEPHONE 904-732-2255

CATHERINE F. ACKERMAN
DANIEL T. DOYLE
KELLY GARDNER HAMER
STEPHANIE L. MULLINS
SCOTT G. REICHERT
JOSEPH W. STANLEY

January 24, 1995

Our File No.:
H126-5293

Division of Corporations
Annual Reports Section
P. O. Box 1500
Tallahassee, Florida 32302-1500

Re: BELLEVIEW FUNERAL HOME, INC.

Gentlemen:

I enclose original 1995 Corporate Annual Report together with check payable to Department of State in the amount of \$200.00 representing the annual filing fee.

Yours very truly,


John P. McKeever

JPM:mkw

Enclosures