2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2005
Secretary of State

DOCUMENT# K81976

Entity Name: BELLEVIEW FUNERAL HOME, INC.

Current Principal Place of Business:

5946 ROBINSON RD
PO BOX 386
BELLEVIEW, FL 344210386 US

New Principal Place of Business:

Current Mailing Address:

44 SE 9TH TERRACE
OCALA, FL 34470 US

New Mailing Address:

1515 E SILVER SPRINGS BLVD
SUITE 201
OCALA, FL 34470 US

FEI Number: 59-2949449 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BAXLEY, DENNIS K
3946 SE ROBINSON ROAD
OCALA, FL 34471 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:	DP	( ) Delete
Name:	HIERS, JOHN M.,	
Address:	5946 SE ROBINSON RD	
City-St-Zip:	BELLEVIEW, FL	
Title:	DV	( ) Delete
Name:	BAXLEY, DENNIS K,	
Address:	5946 SE ROBINSON ROAD	
City-St-Zip:	BELLEVIEW, FL	
Title:	ST	( ) Delete
Name:	BAXLEY, MICHELINE GINE	
Address:	5946 SE ROBINSON ROAD	
City-St-Zip:	BELLEVIEW, FL	
Title:	T	( ) Delete
Name:	BAXLEY, JUSTIN N	
Address:	5946 SE ROBINSON RD	
City-St-Zip:	BELLVIEW, FL 34821	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 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 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: JUSTIN BAXLEY T 01/12/2005

Electronic Signature of Signing Officer or Director — Date