

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 19, 1999 8:00 am  
Secretary of State

04-19-1999 90094 010 \*\*\*150.00

DOCUMENT # K90060

1. Corporation Name

PREARRANGEMENTS OF DELRAY, INC.

Principal Place of Business

135 S E FIFTH AVE  
SECOND FLOOR  
DELRAY BEACH FL 33483  
US

Mailing Address

135 S E FIFTH AVE  
SECOND FLOOR  
DELRAY BEACH FL 33483  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/23/1989

4. FEI Number

65-0123193

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 owes the current year Intangible  
Personal Property Tax.

☐

Yes

☒

No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BRIGHT, J. REEVE  
29 NE 4TH AVE  
DELRAY BEACH FL 33483

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

D  
NAME YEAGER, RUSSELL H.  
STREET ADDRESS 1118 E ATLANTIC AVE  
CITY-ST-ZIP DELRAY BEACH FL

1.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

D  
NAME YEAGER, VICKI T.  
STREET ADDRESS 1118 E ATLANTIC AVE  
CITY-ST-ZIP DELRAY BEACH FL

1.2 NAME

TITLE ☐ DELETE

D  
NAME YEAGER, VICKI T.  
STREET ADDRESS 1118 E ATLANTIC AVE  
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1.3 STREET ADDRESS

TITLE ☐ DELETE

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1.4 CITY-ST-ZIP

TITLE ☐ DELETE

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2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

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2.2 NAME

TITLE ☐ DELETE

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)