## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # K93592

1. Entity Name

RICHARD E. SORENSEN FUNERAL HOME INC.



**FILED** 

Mar 13, 2006 08:00 AM Secretary of State

Principal Place of Business

C/O RICHARD E. SORENSEN 3180 30TH AVE., N ST PETERSBURG, FL 33713 Mailing Address

C/O RICHARD E. SORENSEN 3180 30TH AVE., N ST PETERSBURG, FL 33713

DO NOT WRITE IN THIS SPACE

01032006 No Chg-P CRZE034 (11/05)

4. FEI Number 59-2949339 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent

SORENSEN, RICHARD E. 3180 30TH AVE., N. ST PETERSBURG, FL 33713

## 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  Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent signature regulated when recisions)  DATE					
FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		Election Campaign Finance Trust Fund Contribution.	eing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVPS SORENSEN, RICHARD E. 3180 30TH AVE N ST PETERSBURG, FL 33713				
TITLE NAME STREET ADDRESS CHY-ST-JIP					9444444444444 95722795-14441-198-150-00
TITLE NAME STREET ADDRESS CLTY-SL-ZAP				DO	NOT WRITE
TITLE HAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TIFLE NAME STREET ADDRESS CITY -ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. 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 507, 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.					