

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000004137

FILED
May 03, 2007
Secretary of State

Entity Name: KOTRADY HUDGINS FUNERAL SERVICES, LLC.

Current Principal Place of Business:

209 S PONCE DE LEON BLVD
SAINT AUGUSTINE, FL 32084

New Principal Place of Business:

Current Mailing Address:

209 S PONCE DE LEON BLVD
SAINT AUGUSTINE, FL 32084

New Mailing Address:

FEI Number: 59-3711365 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

GALLETTA, JOHN JR ESQ
4100 A1A SOUTH
ST AUGUSTINE, FL 32080 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KOTRADY, GEORGE
Address: 209 S PONCE DE LEON BLVD
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: MGRM () Delete
Name: HUDGINS, RANDY
Address: 209 S PONCE DE LEON BLVD
City-St-Zip: SAINT AUGUSTINE, FL 32084

ADDITIONS/CHANGES:

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 exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: GEORGE KOTRADY

MGRM

05/03/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date