2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000043649

Entity Name: CONSTANTINO ZIRCKEL FUNERAL CARE, LLC

23 KINGSBRIDGE CROSSING DRIVE

ORMOND BEACH, FL 32174

Address:

City-St-Zip:

FILED Apr 05, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
	EW YORK AVE), FL 32724			
Current Mailing Address:			New Mailing Address:	
	EW YORK AVE), FL 32724			
FEI Numbe	er: 20-1230561	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:	
150 MAG	TO CHARTER S BNOLIA AVE. IA BEACH, FL 3	•		
	ve named entity s ate of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both
SIGNATI	URE:			
	Electron	ic Signature of Registered Age	ent	Date
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:	
Title: Name:	MGR () CONSTANTINO	Delete , ROBYN	Title: Name:	() Change () Addition

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBYN CONSTANTINO MGR 04/05/2007