2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

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Sep 14, 2006 8:00 am
Secretary of State

08-21-2006 90129 010 ****50.00

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2nd MOORE CR2E083 (4/06)

DOCUMENT # L05000061447

1. Entity Name
HUDSON CHAPEL CREMATORY, L.L.C.

Principal Place of Business
9944 HUDSON AVENUE
HUDSON FL 34667

Mailing Address
9944 HUDSON AVENUE
HUDSON FL 34667

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip | Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip | Country

4. FEI Number 59-3500336 | Applied For | Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
DOBIES, THOMAS B
9944 HUDSON AVENUE
HUDSON FL 34667

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City | FL | Zip Code

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 the # applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By September 6, 2006

9. MANAGING MEMBERS / MANAGERS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Delete
MGRM DOBIES, THOMAS B 9944 HUDSON AVENUE HUDSON FL 34667	☐
	☐
	☐
	☐
	☐
	☐
	☐

10. ADDITIONS / CHANGES

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Change	Addition
	☐	☐
	☐	☐
	☐	☐
	☐	☐
	☐	☐
	☐	☐

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 8-15-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #