

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000067876

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Entity Name:** EVA'S GRACE FUNERAL SERVICES, LLC

**Current Principal Place of Business:**

3670 JOSEPH DRIVE  
WEST PALM BEACH, FL 33417

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 30481  
PALM BEACH GARDENS, FL 33420

**New Mailing Address:**

**FEI Number:** 26-1621389

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HENRY, MARY L  
3670 JOSEPH DRIVE  
WEST PALM BEACH, FL 33417 US

**Name and Address of New Registered Agent:**

HENRY, MARY  
3670 JOSEPH DRIVE  
WEST PALM BEACH, FL 33417 US

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: MARY HENRY

05/01/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: ONWEAZUEKWU, BRY'AN E  
Address: PO BOX 16635  
City-St-Zip: ATLANTA, GA 30321

Title: MGR  
Name: HENRY, MARY  
Address: 3670 JOSEPH DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33417

Title: MGRM  
Name: JOHNSON, VASHEA  
Address: PO BOX 30481  
City-St-Zip: PALM BEACH GARDENS, FL 334200481

Title: MGRM  
Name: JOHNSON, LAQUAN  
Address: PO BOX 30481  
City-St-Zip: PALM BEACH GARDENS, FL 334200481

I hereby 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: MARY HENRY

MGR

05/01/2012

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