

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000191

FILED
Jan 08, 2008
Secretary of State

Entity Name: INDEPENDENT FUNERAL DIRECTORS OF FLORIDA, INC.

Current Principal Place of Business:

119 E PARK AVE
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

119 E PARK AVE
TALLAHASSEE, FL 32301 US

New Mailing Address:

P.O. BOX 10969
TALLAHASSEE, FL 323022969 US

FEI Number: 59-3153298

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHEFF, JANETTE M EXDIREC
119 E PARK AVE
TALLAHASSEE, FL 32301 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

OFFICERS AND DIRECTORS:

Title: PP () Delete
Name: ADAMS, STACY
Address: 6900 N NEBRASKA AVE
City-St-Zip: TAMPA, FL 33604 US

Title: P () Delete
Name: LANKFORD, CHERYL
Address: 220 E NEW YORK AVE
City-St-Zip: DELAND, FL 32724

Title: PE () Delete
Name: MORGAN, GEORGE
Address: 6025 TROUBLE CREEK RD
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: VP () Delete
Name: RONNIE, MACKS
Address: 100 BEVERLY PARKWAY
City-St-Zip: PENSACOLA, FL 32505

Title: T () Delete
Name: HASLEY, DOUG
Address: P O BOX 949
City-St-Zip: UMATILLA, FL 32784

Title: AS () Delete
Name: SCHEFF, JANETTE M ADMSEC
Address: 119 E PARK AVE
City-St-Zip: TALLAHASSEE, FL 32301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PP (X) Change () Addition
Name: LANKFORD, CHERYL
Address: 220 EAST NEW YORK AVE
City-St-Zip: DELAND, FL 32724 US

Title: P (X) Change () Addition
Name: MORGAN, GEORGE
Address: 6025 TROUBLE CREEK RD
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: PE (X) Change () Addition
Name: MACKS, RONNIE
Address: 100 BEVERLY PARKWAY
City-St-Zip: PENSACOLA, FL 32505

Title: VP (X) Change () Addition
Name: MACNEILL, DARIN
Address: P.O. BOX 193
City-St-Zip: SEBRING, FL 33871

Title: T (X) Change () Addition
Name: DEAKINS, JOHN
Address: 9395 SW 186TH TERRACE
City-St-Zip: DUNNELLON, FL 344329998

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 or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JANETTE SCHEFF

ED

01/08/2008

Electronic Signature of Signing Officer or Director

Date