2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P00000068597

Name:

Address:

City-St-Zip:

PONZI, SHIRLEY

990 WICALA DRIVE

SAINT AUGUSTINE, FL 32086

FILED Aug 02, 2005 Secretary of State

Entity Name: STEPHENS MEMORIAL HOME, INC. **Current Principal Place of Business: New Principal Place of Business:** % BRENDA L. SPAULDING 5805 DATIL PEPPER ROAD ST. AUGUSTINE, FL 32086 **New Mailing Address: Current Mailing Address:** % BRENDA L. SPAULDING 5805 DATIL PEPPER ROAD ST. AUGUSTINE, FL 32086 FEI Number: 59-3674615 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: SPAULDING, BRENDA L 5805 DATIL PEPPER ROAD ST. AUGUSTINE, FL 32086 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition STEPHENS, BRENDA Name: Name: 5805 DATIL PEPPER ROAD Address: Address: City-St-Zip: SAINT AUGUSTINE, FL 32086 City-St-Zip: (X) Delete Title: VΡ Title: () Change () Addition

Name:

Address:

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I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRENDA STEPHENS **PRES** 08/02/2005