

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000041788

**FILED**  
**Jun 05, 2007**  
**Secretary of State**

**Entity Name:** H. A. DAVIS FUNERAL HOME, INC.

**Current Principal Place of Business:**

608 SW 12TH AVE.  
DANIA BCH, FL 33004

**New Principal Place of Business:**

**Current Mailing Address:**

608 SW 12TH AVE.  
DANIA BCH, FL 33004

**New Mailing Address:**

**FEI Number:** 03-0441561      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

DAVIS, HAROLD A  
608 SW 12TH AVE.  
DANIA BCH, FL 33004      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: HAROLD A DAVIS

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: DAVIS, HAROLD A  
Address: 608 SW 12TH AVE.  
City-St-Zip: DANIA BCH, FL 33004

Title: VD ( ) Delete  
Name: MANUEL, ANTHONY  
Address: 608 SW 12TH AVE.  
City-St-Zip: DANIA BCH, FL 33004

Title: STD ( ) Delete  
Name: BRICE, AUDREY  
Address: 608 SW 12TH AVE.  
City-St-Zip: DANIA BCH, FL 33004

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: DAVIS, HAROLD  
Address: 608 SW 12TH AVE.  
City-St-Zip: DANIA BCH, FL 33004

Title: VD (X) Change ( ) Addition  
Name: BRICE, AUDREY  
Address: 608 SW 12TH AVE.  
City-St-Zip: DANIA BCH, FL 33004

Title: STD (X) Change ( ) Addition  
Name: MANUEL, ANTHONY  
Address: 608 SW 12TH AVE.  
City-St-Zip: DANIA BCH, FL 33004

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HAROLD A DAVIS

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PD

06/05/2007

\_\_\_\_\_  
Date