

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000041781

FILED
Apr 25, 2008
Secretary of State

Entity Name: HERITAGE MEMORIAL FUNERAL & CREMATION SERVICES OF MANATEE-SARASOTA, INC.

Current Principal Place of Business:

211 S. NOKOMIS AVE.
SUITE A
VENICE, FL 34285 US

New Principal Place of Business:

205 SORRENTO DRIVE
OSPREY, FL 34229 US

Current Mailing Address:

211 S. NOKOMIS AVE.
SUITE A
VENICE, FL 34285 US

New Mailing Address:

205 SORRENTO DRIVE
OSPREY, FL 34229 US

FEI Number: 20-0669477

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MALONE, ROBERT A
211 S. NOKOMIS AVE.
SUITE A
VENICE, FL 34285 US

Name and Address of New Registered Agent:

MALONE, ROBERT A
205 SORRENTO DRIVE
OSPREY, FL 34229 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:

04/25/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MALONE, ROBERT A
Address: 211 S. NOKOMIS AVE.
City-St-Zip: VENICE, FL 34285 US

Title: PRES () Delete
Name: MALONE, ROBERT A
Address: 211 S. NOKOMIS AVE.
City-St-Zip: VENICE, FL 34285 FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MALONE, ROBERT A
Address: 205 SORRENTO DRIVE
City-St-Zip: OSPREY, FL 34229 US

Title: PRES (X) Change () Addition
Name: MALONE, ROBERT A
Address: 205 SORRENTO DRIVE
City-St-Zip: OSPREY, FL 34229 FL

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: ROBERT A. MALONE

PRES

04/25/2008

Electronic Signature of Signing Officer or Director

Date