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PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Aug 08 1996 8:00 am  
Secretary of State

DOCUMENT # P04864 (5)

1. Corporation Name

MEMORIAL SERVICES INTERNATIONAL OF FLORIDA, INC.

Principal Place of Business

~~2044 CONSTITUTION BLVD.~~ 3433 E. Forest  
SARASOTA FL 34231 LAKES DR.  
US SARASOTA FL 34231  
34232

Mailing Address

~~2044 CONSTITUTION BLVD.~~  
SARASOTA FL 34231  
US 34232

2. Principal Place of Business

21 3433 E. FOREST LAKES DR.

Suite, Apt. #, etc.

22

City & State

23 SARASOTA, FL

Zip

24 34232

Country

25 SARASOTA

2a. Mailing Address

26 3433 E. FOREST LAKES DR.

Suite, Apt. #, etc.

27

City & State

28 SARASOTA, FL

Zip

29 34232

Country

30 SARASOTA

3. Date Incorporated or Qualified

02/01/1985

3a. Date of Last Report

12/15/1995

4. FEI Number

59-2481183

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

3433 E. Forest Lakes Dr.

83

84 City

FL

85 Zip Code

34232

ROSS, PETER

~~2044 CONSTITUTION BLVD.~~  
SARASOTA FL 34231

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of registered agent or registered agent for service of process

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

P LINDENAU DONNA  
~~2044 CONSTITUTION BLVD.~~  
SARASOTA FL 34231

TITLE NAME STREET ADDRESS CITY-ST-ZIP

SD ROSS, PETER  
3433 E. FOREST LAKES DR.  
SARASOTA FL 34232

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D HEGNER, MARGARET  
3435 FOX RUN RD. #245  
SARASOTA FL 34231

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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TITLE NAME STREET ADDRESS CITY-ST-ZIP

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TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

2309 Outer Dr.

800001917538

-08/09/96--01024--019

\*\*\*2025.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Donna Lindeman Pres. 8/1/96 (941) 922-2857

CR2E034 (12/95)