

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000068932

Entity Name: FLORIDA CREMATION, INC.

FILED
Apr 27, 2009
Secretary of State

Current Principal Place of Business:

708 S.W. 2ND AVENUE
OCALA, FL 34478

New Principal Place of Business:

708 S.W. 2ND AVENUE
OCALA, FL 34471

Current Mailing Address:

POST OFFICE BOX 5819
OCALA, FL 34470

New Mailing Address:

POST OFFICE BOX 5819
OCALA, FL 34478

FEI Number: 59-3259104

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERTS, KEVIN K
708 S.W. 2ND AVENUE
OCALA, FL 34478 US

Name and Address of New Registered Agent:

ROBERTS, KEVIN K
708 S.W. 2ND AVENUE
OCALA, FL 34471 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:

04/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROBERTS, KENNETH
Address: 708 S.W. 2ND AVENUE
City-St-Zip: OCALA, FL 34478

Title: V () Delete
Name: ROBERTS, KEVIN R
Address: 708 S.W. 2ND AVENUE
City-St-Zip: OCALA, FL 34478

Title: ST () Delete
Name: ROBERTS, PATRICIA C
Address: 708 S.W. 2ND AVENUE
City-St-Zip: OCALA, FL 34478

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: PATRICIA C. ROBERTS

D

04/27/2009

Electronic Signature of Signing Officer or Director

Date