2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000041157

Entity Name: TONY TANNER FUNERAL SERVICES INCORPORATED

FILED Nov 10, 2009 Secretary of State

| Current Principal Place of Business: | | | New Principal Place | New Principal Place of Business: | |
|---|--|--|---|--|--|
| 127 NW 20 OCALA, FL | | | | | |
| Current Mailing Address: | | | New Mailing Address | New Mailing Address: | |
| 127 NW 20 OCALA, FL | | | | | |
| FEI Number: | 35-2294643 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address o | Name and Address of New Registered Agent: | |
| TANNER, 10195 HW OCALA, FL | Y. 27 | S | | | |
| The above in the State | | submits this statement for the p | ourpose of changing its registered | d office or registered agent, or both, | |
| SIGNATUR | RE: TONY T | ANNER | | | |
| | Electro | nic Signature of Registered Age | ent | Date | |
| | | 93(2)(b), F.S., the corporation did no | t receive the prior notice. | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | PD (TANNER, TON 10195 HWY. 2 OCALA, FL 3 | 27 | Title: Name: Address: City-St-Zip: | () Change () Addition | |

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: TONY TANNER PO 11/10/2009