## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000001427

Entity Name: GARFIELD FUNERAL SERVICES, INC.

FILED Jan 06, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

4970 DEERFIELD WAY, 202 4970 DEERFIELD WAY NAPLES, FL 34110

202

NAPLES, FL 34110

**Current Mailing Address: New Mailing Address:** 

4970 DEERFIELD WAY, 202 4970 DEERFIELD WAY NAPLES, FL 34110

NAPLES, FL 34110

FEI Number: 41-2263942 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

GARFIELD, TODD P GARFIELD, TODD P 12791 SILVERTHORN COURT 4970 DEERFIELD WAY BONITA SPRINGS, FL 34135 US 202

NAPLES, FL 34110 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: TODD P GARFIELD 01/06/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

GARFIELD, TODD P GARFIELD, TODD P Name: Name: 12791 SILVERTHORN COURT Address: 4970 DEERFIELD WAY #202 Address: City-St-Zip: BONITA SPRINGS, FL 34135 City-St-Zip: NAPLES, FL 34110

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: TODD P GARFIELD MR 01/06/2009