

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000033564

**FILED**  
**Feb 09, 2012**  
**Secretary of State**

**Entity Name:** FUNERAL DIRECTOR ASSOCIATES REMOVAL SERVICES, INC.

**Current Principal Place of Business:**

3910 ROYAL OAKS DR.  
TALLAHASSEE, FL 32309

**New Principal Place of Business:**

1119 CRESTVIEW AVE  
TALLAHASSEE, FL 32303

**Current Mailing Address:**

3910 ROYAL OAKS DR.  
TALLAHASSEE, FL 32309

**New Mailing Address:**

1119 CRESTVIEW AVE  
TALLAHASSEE, FL 32303

FEI Number: 45-1498591

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MONTI, R.J.  
743 RED FERN RD.  
TALLAHASSEE, FL 32308 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BOLDT, B.B. III  
Address: 1119 CRESTVIEW AVE  
City-St-Zip: TALLAHASSEE, FL 32303

I hereby 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 all other like empowered.

SIGNATURE: B.B.BOLDT III

PRES

02/09/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date