

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000003401

**FILED**  
**Apr 22, 2010**  
**Secretary of State**

**Entity Name:** EASTSIDE FUNERAL HOME, INC.

**Current Principal Place of Business:**

2301 NORTH NEBRASKA AVE.  
TAMPA, FL 336021723

**New Principal Place of Business:**

2301 NORTH NEBRASKA AVE.  
TAMPA, FL 336021723 US

**Current Mailing Address:**

P O BOX 77263  
TAMPA, FL 33675 US

**New Mailing Address:**

**FEI Number:** 59-3154821      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

TAYTLO, J. SCOTT  
120 HYDE PARK PLACE  
SUITE 110  
TAMPA, FL 33606 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** DPCS  
**Name:** STEVENS, ROBERT L  
**Address:** 4113 W GRACE ST  
**City-St-Zip:** TAMPA, FL 33607 US

**Title:** DVS  
**Name:** STEVENS, ROBERT L  
**Address:** 4113 GRACE STREET  
**City-St-Zip:** TAMPA, FL

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: ROBERT LEE STEVENS

DPCS

04/22/2010

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

\_\_\_\_\_ Date