FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000047740 (4)

ARTHUR J. MACK FUNERAL HOME, INC.

Principal Place of Business Mailing Address 797 S STONE STREET 797 8 STONE STREET DELAND FL 32720 DELAND FL 32720 2. Principal Place of Business

FILED Apr 28 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/30/1993 2a. Mailing Address Applied For 59-0979078 21 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip ŽΦ Country Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. 30 26 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CUSACK, JAMES E 797 SOUTH STONE STREET Street Address (P.O. Box Number is Not Acceptable) **DELAND FL 32720** 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE PTD TITLE 1.1 Title ☐ Change ☐ Addition PTD MACK, ARTHUR J NAME 1.2 NAME Cusack, James E. **801 PARSONS AVE** STREET ADDRESS 1.3 STREET ADDRESS 799 So. Stone St.-DeLand, FL32720 DELAND FL 32720 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition VSD TITLE 2.1 TITLE CUSACK, JAMES E NAME 2.2 NAME 799 S STONE ST STREET ADDRESS 2.3 STREET ADDRESS DELAND FL 32720 CITY-ST-ZIP 2 4 CITY-ST-ZIP TITLE DELETE Change Addition 3.1 TiTLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 DILE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP Addition THILE DELETE 5.1 TITLE NAME 5.2 NAME STREET ADORESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST-ZIP ■ DELETE Addition 6 1 TITLE NAME 6.2 NAME STREET ADDRESS 6 3 STREET ADDRESS

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annural report is true and accurate and that my 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 in Block 12 or Block 13 if charges, or on an attachment with an address.

6.4 CITY-ST-ZIP