

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P94000078854

**FILED**  
**May 01, 2009**  
**Secretary of State****Entity Name:** FLORIDA CEMETERIES, INC.**Current Principal Place of Business:**6919 PROVIDENCE ROAD  
RIVERVIEW, FL 33578 US**New Principal Place of Business:****Current Mailing Address:**6919 PROVIDENCE ROAD  
RIVERVIEW, FL 33578 US**New Mailing Address:****FEI Number:** 59-3315617**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**LANGFORD, E.C.  
1715 W. CLEVELAND STREET  
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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: ADAMS, MICHAEL J  
Address: 6900 NEBRASKA AVENUE  
City-St-Zip: TAMPA, FL 33604 US

Title: CSD ( ) Delete  
Name: LORTON, GEORGE H  
Address: 1601 SAHLMAN DR.  
City-St-Zip: TAMPA, FL 33605 US

Title: P ( ) Delete  
Name: WICK, MICHAEL  
Address: 6919 PROVIDENCE ROAD  
City-St-Zip: RIVERVIEW, FL 33578 US

Title: D (X) Delete  
Name: ADAMS, STACY  
Address: 6900 NEBRASKA AVENUE  
City-St-Zip: TAMPA, FL 33604 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: ADAMS, MICHAEL J  
Address: 6900 NEBRASKA AVENUE  
City-St-Zip: TAMPA, FL 33604 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: ADAMS, STACY  
Address: 6900 NEBRASKA AVENUE  
City-St-Zip: TAMPA, FL 33604 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: GEORGE H LORTON

CSD

05/01/2009

Electronic Signature of Signing Officer or Director

Date