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

PROFIT CORPORATION ANNUAL REPORT



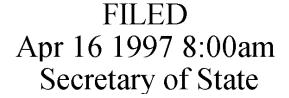
FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P95000018731 (6)

1-PALM COAST MORTUARY, INC.





Principal P 70 CENTRAL WATERBURY		Mailing Address 70 CENTRAL AVE. WATERBURY CT 08702-1207								
							3.03/06/1995	304/2	4/1996	Report
2. Principa 21	al Place of Business	2a, Mailing Address 26					4. FE Name 460 Applied For Not Applicable			
Suite, A	qit #, etc		Suite, Apt. #, etc.			······································	5. Certificate of Status Desired Fee Regulred			
City & S	State	City	& State				6. Election Campaign Financing	<u></u>	\$5.0	0 May Be
23	Country	28 Zip		Coun	try		Trust Fund Contribution			d to Fees
Zip 24		25 29 30			8. This corporation has liability for intangible tax under s. 199. Florida Statutes Yes No			s. 199.032,		
	9. Name and Address of Current Registered Agent CHIUMENTO, MICHAEL D		1991			10. Name and Address of New Registered Agent				
				6	31	Name				
	OLD KINGS ROAD NORTH ALM COAST FL 32137			Ē	32	Street Addre	ess (P.O. Box Number is Not Acceptat	ole)		
"	IN CONTO I L CLIVI			<u> </u>	33			······································	***************************************	
				<u> </u>					Table 19:	- 0
]					34	City		FL	.	p Code
agent.	RE Stgrature, typed or printed name of registered	agent and title if appli	icable. (NC	OTE: Registered			oration submits this statement for the pion's board of directors. I hereby accepted when reinstating)	DATE		
12.	PD OFFICERS A	AND DIRECTOR		13.			ADDITIONS/CHANGES TO OFFICE	ZERS ANI		
1-11.1	MARTIN, JOHN J III		DELETE	1.1 TITL					Change	e 🔲 Addition
NAME CARREL ASSESS	10 BROOKSIDE PLACE			1.2 NAN		ADDRESS				
STREET ADDRE	CHESHIRE CT			1.4 CITY						
101.E	STD		☐ DELETE	2.1 TITL					☐ Change	e Addition
NAME	ANTHONY, JAMES 219 HARWOOD ROAD			22 NAN	Æ					
STREET ADDRE	WATERBURY CT			23 STR	EET	ADDRESS	12	, ,,,		
CITY - ST - ZiP	VD VD		Desert	2 4 CIT		ST-ZIP) *** - ***	<u>, , , , , , , , , , , , , , , , , , , </u>	Change	a Addition
11116	FORD, JOHN W		☐ DEFELE	31 TIYL					Change	e L Addition
NAME executance	45 AMANDA LANE			32 NAN		ADDRESS				
STREET ADDRE	NAUGATUCK CT			3.4. CIT						
mur			DELETE	4.1 TITL	*****				Change	e Addition
NAME				4. 2 NA	ME					
STREET ADDRE	988			4.3 STR	EET	ADDRESS				
City - \$1 - ZiP			[] or ere	4.4 CITY		iT-ZIP			1 06000	- Addition
TITLE		1	☐ DELETE	5.1 TITL					Change	e L Addition
NAME				5.2 NAA		ADDRESS				
STREET ADDRE						ADDRESS				
1011 F			DELETE	5.4 CIT1 6.1 TITL		OLT ZIF			Change	e Addition
NAME				6.2 NAM						
STHEET ADDRE	FSS					ADDRESS				
City-St-ZiP		,	-	6.4 C(T)		l l				

14. I do hereby certify that the information supplied with this filling 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 of supplier ontil annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I are an officer or director of the corporation of 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 changed by on a pattachment with an address

SIGNATURE:

NATURE AND TYPE OF PRINTED NAME OF SKOMING OFFICER OR DIRECTOR PASS

4/11/97 0

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