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**PROFIT** GORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P95000075020 (4)

DOCUMENT # DALE MALONEY FUNERAL HOME, INC. Principal Place of Business Mailing Address 4084 HALIFAX 200 NORLAND AVENUE PORT ORANGE FL 32127 BRITISH COLUMBIA. CANADA VG5 3S8 3. Date Incorporated or Qualified 3a. Date of Last Report 09/28/1995 2. Principa! Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 4126 NORLAND AVENUE 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Zφ 8. This corporation has liability for intangible tax under s. 199.032. 24 Yes 🔣 No 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 C T COPORATION SYSTEM 82 Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD 83 **PLANTATION FL 33324** 84 City Zip Code 85 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. Signature, typed or printed hame of registered agos the lightly may prince 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1 1 10116 Change 🖺 Addition LOEWEN, RAYMOND L. NAME 1.2 NAME CR2E034 4126 NORLAND AVENUE STREET ADDRESS 1.3 STREET ADDRESS BURNABY, B.C. V5G 3S8 CITY - ST - Z/P 1.4 CITY - ST - ZIP T:TLE DELETE 2 1 TIT. F. Addition ☐ Change NAME HYNDMAN, PETER S. 22 NAME STREET ADDRESS 2.3 STREET ADDRESS 4126 NORLAND AVENUE CITY-ST-7IP 2.4 OFY - S1 - ZiP BURNABY, B.C. V5G 3S8 TITLE DELETE 3 1 TITLE Change Addition NAME 3.2 NAME RUSSELL, ROBERT D. STREET ADDRESS 3.3 STREET ADDRESS 200 NORTH FEDERAL HIGHWAY CITY - ST - ZIP 3 4 C-TY - ST - ZIP POMPANO BEACH, FL. 33062 TITLE □ DELETE Change XX Addition 4 1 THTLE NAME 4.2 NAME WRIGHT, GARY L. STREET ADDRESS 4.3 STREET ADDRESS 800-50 EAST RIVERCENTER BLVD. CITY-ST-ZIP 4 4 CITY - ST - ZIP COVINGTON, KY 41011 TITLE DELETE 5 1 TITLE ☐ Change NAME 5.2 NAME MACNAUGHTON, PAULA J. STREET ADDRESS 5.3 STREET ADDRESS 4126 NORLAND AVENUE CITY-ST-ZIP 5.4 CITY - ST - ZIP BURNABY, B.C. V5G 3S8 THILE DELETE 6 1 THILE Change Addition V NAME 6.2 NAME 600001794706 STREET ADDRESS 6.3 STREET ADDRESS -04/25/96--01071--008

6.4 CiTY - ST - ZiP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption activity. Lection 119.07(3)(k), Florida Statutes, Florida Statutes, Florida Statutes, Florida Statutes and that the information indicated on this arms, report or supplemental annual report is true and abcurrate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of this confirmation or the receiver or trustee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Black 13 or Black

SIGNATURE:

appears in Block 12 or Block 13 if chance

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

PETER S. HYNDMAN MARCH 19, 1996 (604) 299-9321

(12/95)