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FILED

Apr 29 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000075020 (4)

1. Corporation Name
DALE MALONEY FUNERAL HOME, INC.

Principal Place of Business

4084 HALIFAX
PORT ORANGE FL 32127

Mailing Address

4126 NORLAND AVE.
BURNABY BC., CANADA V5G 3S8



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

09/28/1995

3a. Date of Last Report

04/25/1996

4. FEI Number

APPLIED FOR 59-2617243

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

C T COPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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 fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME LOEWEN, RAYMOND L.

STREET ADDRESS 4126 NORLAND AVE.

CITY-ST-ZIP BURNABY BC., CANADA V5G 3S8

TITLE DAS ☐ DELETE

NAME HYNDMAN, PETER S.

STREET ADDRESS 4126 NORLAND AVE.

CITY-ST-ZIP BURNABY BC., CANADA V5G 3S8

TITLE AS ☐ DELETE

NAME MACNAUGHTON, PAULA J.

STREET ADDRESS 4126 NORLAND AVE.

CITY-ST-ZIP BURNABY BC., CANADA V5G 3S8

TITLE DP ☐ DELETE

NAME RUSSELL, ROBERT D.

STREET ADDRESS 200 N. FEDERAL HWY.

CITY-ST-ZIP POMPANO BCH. FL 33062

TITLE ST ☒ DELETE

NAME WRIGHT, GARY L.

STREET ADDRESS 800-50 RIVERCENTER BLVD.

CITY-ST-ZIP COVINGTON KY 41011

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☒ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

ST
Rollings, Gregory K.
681 North Avenue
Jonesboro, GA 30236

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I do 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 annual 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 changed, or on an attachment with an address.

SIGNATURE

SIGNATURE REQUIRED

4/22/97

(604) 293-6425

CR2E034 (9/96)