

AMENDED

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000088514

1. Entity Name

DUNDEE-HAINES CITY FUNERAL HOME, INC.

Principal Place of Business

202 Main Street
Dundee, FL 33838

Mailing Address

P. O. Box 1888
202 Main Street
Dundee, FL 33838-1888

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

202 Main Street

Suite, Apt. #, etc.

City & State

City & State
Dundee, FL

Zip

Country

Zip

33838

Country

Polk

4. FEI Number

59-3378477

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LOCKE, JOSEPH W.
P. O. Box 1888
202 Main Street
Dundee, FL 33838-1888

7. Name and Address of New Registered Agent

Name

ROGERS, HERBERT L.

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

202 Main Street

300004589343--2

City

Dundee

09/15/01-01093-012
*****61.25 *****3825

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
tax filing requirement and elects to do so
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2001 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution: ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D
NAME LOCKE, JOSEPH W.
STREET ADDRESS
CITY-ST-ZIP ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP
NAME ROGERS, HERBERT L.
STREET ADDRESS 202 Main Street
CITY-ST-ZIP Dundee, FL 33838 ☐ Change ☒ Addition

TITLE DST
NAME ROGERS, MARIBESS I.
STREET ADDRESS 202 Main Street
CITY-ST-ZIP Dundee, FL 33838 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Herbert L. Rogers

8/10/01

863-439-7723

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2001 AMENDED UBR

CR2E034 (11/00)