

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000019290

1. Entity Name

EAST LAKE MEMORIAL GARDENS, INC.



FILED

04 AUG -9 PM 1:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06/28/04 90008 017 \$150.00



08052004 No Chg-P CR2E034 (10/03)

4. FEI Number

59-3368667

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MILLS, JOHN M
1800 ALTERNATE 19 S
TARPON SPRINGS, FL 34689

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MILLS, JOHN M
STREET ADDRESS	1209 N. FLORIDA AVENUE
CITY - ST - ZIP	TARPON SPRINGS, FL 34689
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

08.06.04
EPA (As Elected Agent) 813223511

PEREZ & COMPANY
CERTIFIED PUBLIC ACCOUNTANTS
PROFESSIONAL ASSOCIATION

August 5, 2004

TAMPA OFFICE
201 EAST KENNEDY BOULEVARD
SUITE 420
TAMPA, FLORIDA 33602
(813) 223-2511
FAX (813) 225-1815
WWW.PACCCPAS.COM

CLEARWATER OFFICE
28960 US 19 N
SUITE 103
CLEARWATER, FL 33761-2403
(727) 781-2255

FRANK PEREZ, JR., C.P.A.
FPEREZJR@PACCCPAS.COM
FRANK PEREZ, III, C.P.A.
FPEREZ3@PACCCPAS.COM

JEFFREY C. MILLER C.P.A.
EMERITUS

MEMBERS
AMERICAN INSTITUTE OF CERTIFIED
PUBLIC ACCOUNTANTS
FLORIDA INSTITUTE OF CERTIFIED
PUBLIC ACCOUNTANTS

**Division of Corporations
Post Office Box 6198
Tallahassee, Florida 32314**

Re: East Lake Memorial Gardens, Inc.

Ladies/Gentlemen:

Our client, the above captioned taxpayer, has asked us to once again transmit the enclosed 2004 For Profit Corporation Annual Report.

We had previously filed this form with you on or about June 30, 2004 and enclosed our remittance (check #1245 dated June 23, 2004) in the amount of \$150.00.

In accordance with s.6073193(2)(b), F.S., the corporation did not receive the prior notice that was due on or before May 1, 2004, and consequently, we ask that you waive the late filing penalty of \$400.00.

If you should have any questions or require any additional information, please do not hesitate to contact us.

Very truly yours,

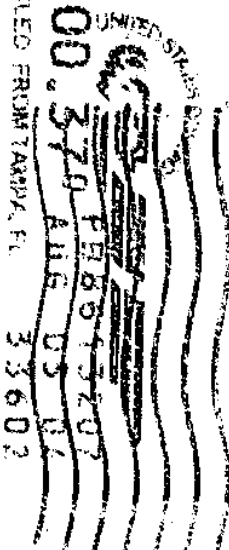


Frank Perez, Jr.

**FPjr/lah
Enclosure
pc: East Lake Memorial Gardens, Inc.**

PEREZ & COMPANY
CERTIFIED PUBLIC ACCOUNTANTS
PROFESSIONAL ASSOCIATION
201 EAST KENNEDY BOULEVARD
SUITE 420
TAMPA, FLORIDA 33602

Division of Corporations
Post Office Box 6198
Tallahassee, Florida 32314



32314+6198

