

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000030254

**FILED**  
**May 09, 2012**  
**Secretary of State**

**Entity Name:** PALMS WEST FUNERAL HOME AND CREMATORY, INC.

**Current Principal Place of Business:**

110 BUSINESS PARKWAY  
ROYAL PALM BEACH, FL 33411

**New Principal Place of Business:**

110 BUSINESS PARKWAY  
ROYAL PALM BEACH, FL 33411 UN

**Current Mailing Address:**

110 BUSINESS PARKWAY  
ROYAL PALM BEACH, FL 33411

**New Mailing Address:**

**FEI Number:** 65-0678131      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HICKMAN, WALLACE W SR  
1084 CARAMBOLA CIRCLE  
WEST PALM BEACH, FL 33406 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PST  
Name: HICKMAN, WALLACE W SR  
Address: 1084 CARAMBOLA CIRCLE  
City-St-Zip: WEST PALM BEACH, FL

Title: VP  
Name: HICKMAN, WALLACE W JR  
Address: 6401 TRAVIS ROAD  
City-St-Zip: WEST PALM BEACH, FL

Title: VP  
Name: ALMEIDA, JULIAN  
Address: 110 BUSINESS PARK WAY  
City-St-Zip: ROYAL PALM BEACH, FL

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: WALLACE HICKMAN JR.

VP

05/09/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date