

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000048550

FILED
Jul 13, 2005
Secretary of State

Entity Name: GILLIAM, BROWN & SHANNON FUNERAL HOME, INC.

Current Principal Place of Business:

925 S. VERONA AVENUE
AVON PARK, FL 33825 US

New Principal Place of Business:

Current Mailing Address:

925 S. VERONA AVENUE
AVON PARK, FL 33825 US

New Mailing Address:

FEI Number: 65-0753018

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCOLLUM, JAMES F
129 SOUTH COMMERCE AVENUE
SEBRING, FL 33870 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GILLIAM, R. L
Address: 662 LEMON STREET
City-St-Zip: SEBRING, FL 33870

Title: D () Delete
Name: BROWN, THOMAS J
Address: 1407 SELPH AVENUE
City-St-Zip: SEBRING, FL 33870

Title: D () Delete
Name: SHANNON, ROBERT
Address: 1406 LUCAS DRIVE
City-St-Zip: SEBRING, FL 33870

Title: D () Delete
Name: KNIGHT, THEDOLEY
Address: 1315 GARWOOD AVENUE
City-St-Zip: SEBRING, FL 33870

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: THOMAS J BROWN

D

07/13/2005

Electronic Signature of Signing Officer or Director

Date