2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P97000090219

Entity Name: ROLLING OAKS CEMETERY, INCORPORATED

FILED Apr 27, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2200 S.W. DEL RIO BLVD. PORT ST. LUCIE, FL 34953

Current Mailing Address: New Mailing Address:

2200 S.W. DEL RIO BLVD.

PORT ST. LUCIE, FL 34953

C/O STEPHEN J. KRUMFOLZ
1301 SE PORT ST. LUCIE BLVD.
PORT ST. LUCIE, FL 34952

FEI Number: 65-0784656 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

NOVATT, JEFF M ESQ
821 FIFTH AVENUE SOUTH
SUITE 201
NAPLES, FL 34102 US
SUMMER, ROBERT P ESQ
2400 SE FEDERAL HIGHWAY
FOURTH FLOOR
STUART, FL 34994 US

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: ROBERT P. SUMMERS 04/27/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 DP
 () Delete
 Title:
 DP
 (X) Change () Addition

 Name:
 ROMANO, MICHAEL F
 Name:
 KRUMFOLZ, STEPHEN J

 Address:
 148 NORTH LAKE SHORE DRIVE, P.O. BOX 37
 Address:
 1301 SE PORT ST. LUCIE BLVD.

City-St-Zip: BROOKFIELD, CT 06804 City-St-Zip: PORT ST. LUCIE, FL 34952

Title: DST () Delete Title: DVST (X) Change () Addition Name: RICHETELLI, GARY M Name: SKILES, DAVID W

 Address:
 2200 BOSTON POST ROAD
 Address:
 1301 SE PORT ST. LUCIE BLVD.

 City-St-Zip:
 ORANGE, CT 06477
 City-St-Zip:
 PORT ST. LUCIE, FL 34952

Title: VP (X) Delete Title: () Change () Addition

 Name:
 ANASTASIO, ROBERT
 Name:

 Address:
 2 BROADWAY
 Address:

 City-St-Zip:
 NORTH HAVEN, CT 06473
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: STEPHEN J. KRUMFOLZ DP 04/27/2009