

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000011962

FILED
Apr 19, 2007
Secretary of State

Entity Name: HORIZON FUNERAL HOME & CREMATION CENTER, INC.

Current Principal Place of Business:

1605 COLONIAL BLVD
FT MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

1605 COLONIAL BLVD
FT MYERS, FL 33907

New Mailing Address:

FEI Number: 65-0809645

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS, MARK
1605 COLONIAL BV
FORT MYERS, FL 33907 US

Name and Address of New Registered Agent:

DAVIS, MARK E
1605 COLONIAL BV
FORT MYERS, FL 33907 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: MARK E. DAVIS

04/19/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: DAVIS, MARK E
Address: 1605 COLONIAL BOULEVARD
City-St-Zip: FORT MYERS, FL 33907

Title: SVD () Delete
Name: DAVIS, VALERIE
Address: 1605 COLONIAL BOULEVARD
City-St-Zip: FORT MYERS, FL 33907

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: MARK E. DAVIS

PRES

04/19/2007

Electronic Signature of Signing Officer or Director

Date