

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 04, 2000 8:00 am
Secretary of State

04-04-2000 90049 040 ***150.00

DOCUMENT # P99000103151
 1. Entity Name
FIK FUNERAL HOME ACQUISITION, INC.

Principal Place of Business 1717 BOGGEY CREEK ROAD KISSIMMEE FL 34744	Mailing Address 1717 BOGGEY CREEK ROAD KISSIMMEE FL 34744
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 1107 MASSACHUSETTS AVE	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State ST. CLOUD FL.	City & State
Zip 34769	Country USGOLA

4. FEI Number 59-3608103	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**RUDOLPH, JOHN A JR
 1680 METROPOLITAN CIRCLE
 TALLAHASSEE FL 32308**

7. Name and Address of New Registered Agent
 Name **TERRY LEE ROBERTS**
 Street Address (P.O. Box Number is Not Acceptable)
2665 HILLIARD CT.
 City **KISSIMMEE** FL Zip Code **34744**

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.
 SIGNATURE **TERRY LEE ROBERTS DST Terry Lee Roberts** DATE **9/23/00**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP RUSSELL, ROBERT D 1717 BOGGEY CREEK ROAD KISSIMMEE FL 34744 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV DEPPIN, RONALD L 1717 BOGGEY CREEK ROAD KISSIMMEE FL 34744 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST ROBERTS, TERRY 1717 BOGGEY CREEK ROAD KISSIMMEE FL 34744 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Terry Lee Roberts** **TERRY LEE ROBERTS** DATE **9/23/00** (407) 847-2494
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)