

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Mar 29, 2001 08:00 AM**
Secretary of State**DOCUMENT # V60193**1. Entity Name
ABBEY HILLS MEMORY GARDENS, INC.Principal Place of Business
1425 BELLEVUE AVE.
DAYTONA BEACH FLMailing Address
1425 BELLEVUE AVE.
DAYTONA BEACH FL2. Principal Place of Business
2966 BELCHER ROAD NORTH3. Mailing Address
2966 BELCHER ROAD NORTH

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
PALM HARBOR FLCity & State
PALM HARBOR FL4. FEI Number
59-3139993Applied For
Not ApplicableZip
34683 Country
USZip
34683 Country
US5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

TIMMER, MARILYN F.
1425 BELLEVUE AVE.DAYTONA BEACH FL
32114 US

7. Name and Address of New Registered Agent

Name

TIMMER, MARILYN F.

Street Address (P.O. Box Number is Not Acceptable)
2966 BELCHER ROAD NORTHCity
PALM HARBORFL Zip Code
34683

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 _____ 03/29/2001
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE9. 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, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME TIMMER, MARILYN
STREET ADDRESS 1425 BELLEVUE AVE.
CITY-ST-ZIP DAYTONA BEACH FLTITLE D ☐ Delete
NAME TIMMER, WILLARD L.
STREET ADDRESS 1425 BELLEVUE AVE.
CITY-ST-ZIP DAYTONA BEACH FLTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ST ☒ Change ☐ Addition
NAME WALSH, MICHAEL P
STREET ADDRESS 458 VILLAGE DRIVE
CITY-ST-ZIP TARPON SPRINGS FL 34689TITLE P ☒ Change ☐ Addition
NAME WALSH, MARILYN JEAN
STREET ADDRESS 458 VILLAGE DRIVE
CITY-ST-ZIP TARPON SPRINGS FL 34689TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: MARILYN JEAN WALSH

P

03/29/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)