

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000002816

Entity Name: WILLIAMS FUNERAL HOME OF GRACEVILLE, L.L.C.

Current Principal Place of Business:

5283 BROWN STREET
GRACEVILLE, FL 32440

Current Mailing Address:

PO BOX 337
GRACEVILLE, FL 32440

FEI Number: 59-3704432

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BAKER, FRANK A
4431 LAFAYETTE STREET
MARIANNA, FL 32446 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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name WILLIAMS, THOMAS WADE
Address 5283 BROWN STREET
City-State-Zip: GRACEVILLE FL 32440

Title MGR
Name WILLIAMS, JOAN
Address 5283 BROWN STREET
City-State-Zip: GRACEVILLE FL 32440

Title MBRM
Name BAKER, LYNN W
Address 4431 LAFAYETTE ST
City-State-Zip: MARIANNA FL 32446

I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LYNN W. BAKER

MBRM

02/19/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date