

**ANNUAL PNL FINANCIAL STATEMENT AND RENEWAL STATEMENT CERTIFICATION  
AND APPLICATION FOR RENEWAL  
Division of Funeral, Cemetery, and Consumer Services  
Form DFS-PNL-R4**

**Licensee:** «LicenseeName2»  
**License #:** «LICENSEE\_LICENSE\_NUM»      **For renewal effective on:** 7/1/20\_\_

1) **Changes and Adverse Actions.** The following questions relate to changes and new information regarding the preneed licensee, since licensee's licensure date or, if renewed, since the last renewal:

	YES	NO
a. Any changes in licensee's legal entity:	___	___
b. Any changes in ownership of licensee:	___	___
c. Any disciplinary proceedings pursuant to Chapter 497, F.S., (against licensee or any principal of licensee):	___	___
d. Licensee or any principal of licensee convicted or found guilty of a crime:	___	___

2) **Financial statement certification.**

- a) Check one: \_\_\_ Financial statements are attached; \_\_\_ Our fiscal year does not end on December 31<sup>st</sup>, and we have already sent our most recent financial statements to the Division, in compliance with paragraph 497.453(5)(b), F.S.
- b) I do affirm that the financial statements, submitted as identified above, comply with GAAP and that the information contained in said financial statements is true and correct.
- c) The Division may contact the following person for information concerning the financial statements:

Name: \_\_\_\_\_ Phone # with area code: \_\_\_\_\_

d) The NET WORTH of the preneed licensee at the end of its most recently ended fiscal year was: \$\_\_\_\_\_.

3) **Annual R3 Renewal Statement Certification.** I hereby affirm that the information submitted in the attached R3 forms (DFS-PNL-R3A and DFS-PNL-R3B) is true and correct.

4) **Application for Renewal.**

The preneed licensee identified on this page hereby applies for renewal of its preneed license.

Print name of person signing for preneed licensee: \_\_\_\_\_

\_\_\_\_\_  
Signature of Preneed Licensee or Authorized Representative

Must be notarized below.

\*\*\*\*\*

**NOTARY**

STATE OF \_\_\_\_\_, COUNTY OF \_\_\_\_\_

The foregoing instrument was sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, in the year \_\_\_\_\_, by \_\_\_\_\_, who (check one):

- \_\_\_ Is personally known to me
- \_\_\_ Produced a picture ID of the following type:

\_\_\_\_\_  
Signature of Notary

Affix Seal