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Serio a El Sombon Andre Annual Report  1996  DOCUMENT # F66417  (9)  CEMETERY MANAGEMENT, 1NC.  Principal Place of Bannose  Mainty Addisons  2400 Harrel 1 Road Orlando, FL 32817  Suite 365  Suite 365  Suite 767  Suite 365  Suite 767  Suite 76			NG FEE AFTE	R MAY 1 IS	\$225.00	_	
ANNUAL REPORT  1996    Composition for Composition Name   Composition		PROFIT FLORIDA DI		FLORIDA DEPART	MENT OF STATE		
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CEMETERY MANAGEMENT, INC.    Process Place of Business		1996	Go 81 18	DIVISION OF CO	DRPORATIONS		
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### April 1. Pursuant to the prospering of Sections 807,0002 and 807,1006   Florida Statules   Florida Statu			_		ido Ave		
2. Moting Address   2. Moting Address   3. Moting Address   5. Certificate of Status Defined   58.75 Additional February   58.00 May per Additional February   58.0					FL 32789	· ·	
25   26   27   27   27   27   20   20   27   20   20	2. Principal Pl	ace of Business	2a. 1	Mailing Address	<del></del>	4. FEI Number	<del></del>
Sc. Certificate of Status Desired   St. Certificate of Status Desired Of Desired Des	21		<u> </u>				
City & State    City & State   City & City & State   City & Ci	Suite, Apt.	#, etc.	<b>├</b> ──	Suite, Apt. #, etc.		5. Certificate of Status Desired	•
Trust fund Contribution		9		City & State		6. Election Campaign Financing	
Section 2015   Process Standards   Process S	23	1 0		·		, ,	y way be
9. Name and Address of Current Registered Agent    10. Name and Address of New Registered Agent	Ζφ 24	<del></del>	· -	· —			=
RAYMOND C. KNOPE, JR.  **SOLET ADDRESS**  **SUITE AGASSIS PO AGASSIS PORT PARK I AGASSIS PARK I AG							
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SUITE 366	82 Street Address (P.O. Box Number is Not Acceptable)						
SULTE 365    Section   Sec							
11. Pursuant to the provisions of Socions 607.0502 and 607.1508. Florica Statutes the above named corporations this statement for the purpose of registered agent, bright, in the State of Pompa Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered disperil. I am the State of Pompa Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered disperil. I am the State of Pompa Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered disperil. I am the State of Pompa Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered disperil. I am the State of Pompa Such Change was authorized by the corporation's board of directors. I hereby accept the appointment as registered disperil. I am the support of the purpose of change are specified of the appointment as registered disperil. I am the support of the purpose of change are specified of the appointment as registered disperil. I am the support of the purpose of change was registered disperil. I am the support of the purpose of change are specified of the appointment as registered disperil. I am the	*****		•			SUITE 365	
11. Pursuant to the proviptions pil Sections 807.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing as registered office or registered agent. I sum, in the State of Primals. Such change was submorated by the corporation is board of directors. I hereby accept the appointment as registered agent. I am in the State of Primals. Such change was submorated by the corporation is board of directors. I hereby accept the appointment as registered agent. I am in the State of Primals. Such change statutes    Statuture				- · · <u></u>	,	WINTER PARK	FL   32789
SINATURE    STATE   Communication   Communicat	11. Pursuant to the provisions of Sections 607,0502 and 607,1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing de registered office						
12. OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	11/20101						
12. OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12   11   11   11   11   12   13   14   14   14   16 hereby certify stars in pressure of the first start in pressure in the first start in t		Signature, ped or printed name	e of registered agent and title if app	icable (NOTE F	Registered Agent signature r		7/4/94
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certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same lead effect on it made	14. I do hereby	certify that the informa	ation supplied with this filir	ng is voluntarily furnished	d and does not qua	ify for the exemption stated in Section 11	9.07(3)(k), Florida Statutes I further

SIGNATURE: \_

Corinne I. Olvey, VP/S 4/29/96 407/740-7000