

**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**FILED**  
**Feb 12 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # M65301 (7)**

1. Corporation Name  
**DORSEY FUNERAL HOME, INC.**

Principal Place of Business <b>3525 S CONGRESS AVE                  LAKE WORTH FL 33461                  US</b>	Mailing Address <b>1929 ALLEN PARKWAY AVENUE                  9TH FLOOR DEPT 2934                  HOUSTON TX 77019</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

3. Date Incorporated or Qualified <b>01/21/1988</b>	
4. FEI Number <b>59-2869529</b>	Applied For <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**THE PRENTICE HALL CORP. SYSTEM, INC.  
 1201 HAYS STREET, SUITE 105  
 TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. State	85. Zip Code

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 its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
PD	CLAIBORNE, TIMOTHY	DPT 2934 9TH FL 1929 ALLEN PKWY	HOUSTON TX 77019	
V	BANGO, FRANK	8350 N.W. 52ND TERRACE #200	MIAMI FL 33166	
V	CHESLER, RICHARD A	DPT 2934 9TH FL 1929 ALLEN PKWY	HOUSTON TX 77019	
STD	GOFF, JOAN B	1929 ALLEN PARKWAY	HOUSTON TX 77019	
V	CONKLIN, KENNETH W	DEPT 2934 9TH FLOOR 1929 ALLEN PARKWAY	HOUSTON TX 77019	
SD	FRAZIER, MARY JANE	DPT 2934 9TH FL 1292 ALLEN PKWY	HOUSTON TX 77019	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
PRESIDENT	FRANK BANGO	1929 ALLEN PARKWAY, 9TH FL	HOUSTON TX 77019	
VP	KENNETH W. CONKLIN	1929 ALLEN PARKWAY, 9TH FL	HOUSTON, TX 77019	
VP	TIMOTHY J. CLAIBORNE	1929 ALLEN PARKWAY, 9TH FL	HOUSTON, TX 77019	
DIRECTOR	SUZANNE DINEFF	1929 ALLEN PARKWAY, 9TH FL	HOUSTON, TX 77019	
DIRECTOR	LISA M. NEWBURN	1929 ALLEN PARKWAY, 9TH FL	HOUSTON, TX 77019	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* JOAN B. GOFF / SECRETARY 712 / 522-5141

CR2E034 (10/97)