

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000113662

Entity Name: S.E. FUNERAL HOMES OF FLORIDA, LLC

Current Principal Place of Business:

301 NE IVANHOE BLVD
ORLANDO, FL 32804

FILED
Apr 06, 2016
Secretary of State
CC4685331584

Current Mailing Address:

1929 ALLEN PARKWAY
TAX DEPT
HOUSTON, TX 77019 US

FEI Number: 59-2050710

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 AHYS ST
TALLAHASSEE, FL 32301 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	MANAGER	Title	MANAGER
Name	KEY, JANET S	Name	GARRETT, SUSAN L
Address	1929 ALLEN PARKWAY TAX DEPT	Address	1929 ALLEN PARKWAY TAX DEPT
City-State-Zip:	HOUSTON TX 77019	City-State-Zip:	HOUSTON TX 77019
Title	MANAGER	Title	MEMBER
Name	LONGINO, NOBLE L	Name	TRIESCH, MICHAEL G
Address	1929 ALLEN PARKWAY TAX DEPT	Address	1929 ALLEN PARKWAY TAX DEPT
City-State-Zip:	HOUSTON TX 77019	City-State-Zip:	HOUSTON TX 77019
Title	MEMBER	Title	VP
Name	GIBBS, BRENDA K	Name	GEHL, PAMELA J
Address	1333 S CLEARVIEW PKWY	Address	1333 S CLEARVIEW PKWY
City-State-Zip:	JEFFERSON LA 70121	City-State-Zip:	JEFFERSON LA 70121
Title	VP	Title	VP
Name	GRUENDL, KEITH L	Name	BRIGGS, CURTIS G
Address	1333 S CLEARVIEW PKWY	Address	1929 ALLEN PARKWAY TAX DEPT
City-State-Zip:	JEFFERSON LA 70121	City-State-Zip:	HOUSTON TX 77019

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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: MICHAEL G TRIESCH

TREASURER

04/06/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title VP
Name GUARA, MANUEL
Address 1333 S CLEARVIEW PKWY
City-State-Zip: JEFFERSON LA 70121

Title VP
Name LACOUR, ANGELA M
Address 1333 S CLEARVIEW PKWY
City-State-Zip: JEFFERSON LA 70121