

**2018 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 30, 2018**  
**Secretary of State**  
**CC0992750643**

**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 HAYS 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

**Continues on page 2**

*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

**MANAGER**

**04/30/2018**

\_\_\_\_\_  
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