

**2014 FLORIDA LIMITED LIABILITY COMPANY AMENDED 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**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:**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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  
Name KEY, JANET S  
Address 1929 ALLEN PARKWAY  
TAX DEPT  
City-State-Zip: HOUSTON TX 77019

Title MANAGER  
Name GARRETT, SUSAN L  
Address 1929 ALLEN PARKWAY  
TAX DEPT  
City-State-Zip: HOUSTON TX 77019

Title MANAGER  
Name LONGINO, NOBLE L  
Address 1929 ALLEN PARKWAY  
TAX DEPT  
City-State-Zip: HOUSTON TX 77019

Title MEMBER  
Name TRIESCH, MICHAEL G  
Address 1929 ALLEN PARKWAY  
TAX DEPT  
City-State-Zip: HOUSTON TX 77019

Title MEMBER  
Name GIBBS, BRENDA K  
Address 1333 S CLEARVIEW PKWY  
City-State-Zip: JEFFERSON LA 70121

Title VP  
Name GEHL, PAMELA J  
Address 1333 S CLEARVIEW PKWY  
City-State-Zip: JEFFERSON LA 70121

Title VP  
Name GRUENDL, KEITH L  
Address 1333 S CLEARVIEW PKWY  
City-State-Zip: JEFFERSON LA 70121

Title VP  
Name BRIGGS, CURTIS G  
Address 1929 ALLEN PARKWAY  
TAX DEPT  
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****MEMBER****05/15/2014**

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