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May 06, 1999 8:00 am
Secretary of State

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**PROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 278121

1. Corporation Name

CHAPEL HILL CEMETERY INC

Principal Place of Business

**1201 S ORLANDO AVE #365
WINTER PARK FL 32789**

Mailing Address

**1201 S ORLANDO AVE #365
WINTER PARK FL 32789**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/04/1964

4. FEI Number

59-1036850

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

**KNOPKE, KEENAN L
1201 S. ORLANDO AVE., SUITE 365
WINTER PARK FL 32789**

10. Name and Address of New Registered Agent

81 Name **CT CORPORATION SYSTEM**
82 Street Address **1200 PINE ISLAND ROAD**
83
84 City **PLANTATION, FL 33324**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PAS** ☐ DELETE
NAME **KNOPE, KEENAN L**
STREET ADDRESS **1201 S ORLANDO AVE #365**
CITY-ST-ZIP **WINTER PARK FL**

TITLE **T** ☐ DELETE
NAME **MATASAVAGE, FRANK L**
STREET ADDRESS **1201 S ORLANDO AVE #365**
CITY-ST-ZIP **WINTER PARK FL**

TITLE **VPSD** ☐ DELETE
NAME **HEFFRON, BRENT F**
STREET ADDRESS **1201 S ORLANDO AVE #365**
CITY-ST-ZIP **WINTER PRK FL**

TITLE **S** ☒ DELETE
NAME **OLVEY, CORINNE I**
STREET ADDRESS **1201 S ORLANDO AVE #365**
CITY-ST-ZIP **WINTER PARK FL**

TITLE **AS** ☒ DELETE
NAME **PATRON, RONALD H**
STREET ADDRESS **110 VETERANS BLVD.**
CITY-ST-ZIP **METAIRIE LA**

TITLE **AS** ☐ DELETE
NAME **BUDE, KENNETH C**
STREET ADDRESS **110 VETERAN'S DR.**
CITY-ST-ZIP **METAIRIE LA**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **D** ☐ Change ☒ Addition
1.2 NAME **ROWE, WILLIAM E.**
1.3 STREET ADDRESS **110 VETERANS MEMORIAL BLVD**
1.4 CITY-ST-ZIP **METAIRIE, LA 70005**

2.1 TITLE **D** ☐ Change ☒ Addition
2.2 NAME **HENICAN, JOSEPH P. III**
2.3 STREET ADDRESS **110 VETERANS MEMORIAL BLVD**
2.4 CITY-ST-ZIP **METAIRIE, LA 70005**

3.1 TITLE **AS** ☐ Change ☒ Addition
3.2 NAME **TRAHAN, LORALICE A.**
3.3 STREET ADDRESS **110 VETERANS MEMORIAL BLVD**
3.4 CITY-ST-ZIP **METAIRIE, LA 70005**

4.1 TITLE **T/S** ☒ Change ☐ Addition
4.2 NAME **MATASAVAGE, FRANK L.**
4.3 STREET ADDRESS **1201 S ORLANDO AVE #365**
4.4 CITY-ST-ZIP **WINTER PARK, FL 32789**

5.1 TITLE **D/V/P/AS** ☒ Change ☐ Addition
5.2 NAME **HEFFRON, BRENT F.**
5.3 STREET ADDRESS **1201 S ORLANDO AVE #365**
5.4 CITY-ST-ZIP **WINTER PARK, FL 32789**

6.1 TITLE **P/AS** ☒ Change ☐ Addition
6.2 NAME **KNOPKE, KEENAN L.**
6.3 STREET ADDRESS **1201 S ORLANDO AVE #365**
6.4 CITY-ST-ZIP **WINTER PARK, FL 32789**

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, with all other like empowered.

SIGNATURE:

SIGNATURE OR PRINTED NAME OF

Brent F. Heffron

April 14, 1999

(407) 740-7000

CR2E034 (11/98)