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May 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 313565 (4)

1. Corporation Name
GOOD SHEPHERD MEMORIAL GARDENS, INC.

Principal Place of Business	Mailing Address
5050 SOUTHWEST 20 STREET P O BOX 489 OCALA FL 32674-1846	5050 SOUTHWEST 20 STREET P O BOX 489 OCALA FL 32674-1846

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/08/1967

2. Principal Place of Business	2a. Mailing Address	4. FEI Number: 59-1157844	☐ Applied For ☐ Not Applicable
21	26 1201 S. Orlando Ave.		
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27 Suite 365	5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
City & State 23	City & State 28 Winter Park, FL	6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
Zip 24 / Country 25	Zip 29 32789 / Country 30 USA	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
DOUGLAS H. JENNINGS 5050 S.W. 20TH STREET P.O. BOX 489 OCALA FL 34474	81 Name: Keenan L. Knopke 82 Street Address (P.O. Box Number is Not Acceptable): 1201 S. Orlando Ave 83: Suite 365 84 City: Winter Park FL 85 Zip Code: 32789

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: Keenan Knopke — 4/20/98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) — DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P JENNINGS, DOUGLAS H. 5050 S.W. 20TH STREET OCALA, FL 00000	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	P/AS Keenan L. Knopke 1201 S. Orlando Ave., # 365 Winter Park, FL 32789	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST JENNINGS, DOUGLAS 5050 SW 20TH ST OCALA, FL 00000	☑ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	D/VP/AS Brent F. Heffron 1201 S. Orlando Ave., # 365 Winter Park, FL 32789	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	S CORINNE I. OLVEY 1201 S. Orlando Ave., Ste. 365 Winter Park, FL 32789	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS Kenneth C. Budde 110 Veterans Memorial Blvd. Metairie, LA 70005	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	T Frank L. Matasavage 1201 S. Orlando Ave., Ste. 365 Winter Park, FL 32789	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS Ronald H. Patron 110 Veterans Memorial Blvd. Metairie, LA 70005	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	D William E. Rowe 110 Veterans Memorial Blvd. Metairie, LA 70005	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	D Joseph P. Henican, III 110 Veterans Memorial Blvd. Metairie, LA 70005	☐ Change ☑ Addition

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: Corinne I. Olvey — Corinne I. Olvey — 4-22-98 — 407/740-7000

CR2E034 (10/97)