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Apr 29 1997 8:00am

Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 631052 (8)

1. Corporation Name

LEVITT-WEINSTEIN MEMORIAL CHAPELS, INC.

Principal Place of Business

111 SKOKIE BLVD  
WILMETTE IL 60091

Mailing Address

4126 NORLAND AVE.  
BURNABY BC. CANADA V5G 3S8



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

07/27/1979

3a. Date of Last Report

04/25/1996

4. FEI Number

36-3033701

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 has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 C ☐ DELETE  
NAME WEINSTEIN, JOEL W  
STREET ADDRESS 111 SKOKIE BOULEVARD  
CITY-ST-ZIP WILMETTE IL 60091

TITLE V ☐ DELETE  
NAME LEVITT, SONNY  
STREET ADDRESS 18440 WEST DIXIE HIGHWAY  
CITY-ST-ZIP NORTH MIAMI BEACH FL 33180

TITLE DAS ☐ DELETE  
NAME HYNDMAN, PETER S.  
STREET ADDRESS 4126 NORLAND AVE.  
CITY-ST-ZIP BURNABY BC., CANADA V5G 3S8

TITLE VP ☐ DELETE  
NAME MALINOW, ROBERT  
STREET ADDRESS 18840 W DIXIE HIGHWAY  
CITY-ST-ZIP NORTH MIAMI BEACH FL 33180

TITLE PSD ☐ DELETE  
NAME CUTLER, NORMAN  
STREET ADDRESS 111 SKOKIE BLVD  
CITY-ST-ZIP WILMETTE IL 60091

TITLE ST ☒ DELETE  
NAME WRIGHT, GARY L.  
STREET ADDRESS 800-50 E. RIVERCENTER BLVD.  
CITY-ST-ZIP COVINGTON KY 41011

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☒ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

ST  
Rollings, Gregory K.  
681 North Avenue  
Jonesboro, GA 30236

14. I do 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 in an attachment with an address.

SIGNATURE:

SIGNATURE REQUIRED

4/22/97

(604) 293-6425

CR2E034 (9/96)