FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2002 8:00 am
Secretary of State
04-07-2002 90567 020 ***150.00

DOCUMENT # F00000006815

1. Entity Name
AMERICAN BURIAL AND CREMATION CENTERS, INC.

759131

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
311 ELM STREET	2225 SHEPPARD AVE. E.
Suite, Apt. #, etc.: SUITE 1000	Suite, Apt. #, etc.: SUITE 1100
City & State: CINCINNATI, OHIO	City & State: TORONTO, ONTARIO
Zip: 45202 Country: U.S.A.	Zip: M2J 5C2 Country: CANADA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 61-1300771 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: CT CORPORATION SYSTEM
Street Address (P.O. Box Number is Not Acceptable): 1200 SOUTH PINE ISLAND ROAD
City: PLANTATION **FL** Zip Code: 33324

8. 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PRESIDENT
NAME	PAUL A. HOUSTON
STREET ADDRESS	1100 - 2225 SHEPPARD AVE. E.
CITY-ST-ZIP	TORONTO, ON M2J 5C2 CANADA
TITLE	SECRETARY
NAME	LAUREL J. LANGFORD
STREET ADDRESS	1100 - 2225 SHEPPARD AVE. E.
CITY-ST-ZIP	TORONTO, ON CANADA M2J 5C2
TITLE	TREASURER
NAME	LAUREL J. LANGFORD
STREET ADDRESS	1100 - 2225 SHEPPARD AVE. E.
CITY-ST-ZIP	TORONTO, ON CANADA M2J 5C2
TITLE	VICE-PRESIDENT
NAME	HERBERT A. MAYES
STREET ADDRESS	8624 GARTH ROAD
CITY-ST-ZIP	BAYTOWN, TX 77521
TITLE	DIRECTOR
NAME	JEFFREY LOWE
STREET ADDRESS	1100 - 2225 SHEPPARD AVE. E.
CITY-ST-ZIP	TORONTO, ON CANADA M2J 5C2
TITLE	DIRECTOR
NAME	WILLIAM TOTTLE
STREET ADDRESS	1100 - 2225 SHEPPARD AVE. E.
CITY-ST-ZIP	TORONTO, ON CANADA M2J 5C2

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CR2E034B (12/01)

13. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: L. Langford LAUREL J. LANGFORD 03/26/02 (416) 498-2430
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

FL210 - 2/26/2002 C T System Online