


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2007 8:00 am
Secretary of State

05-04-2007 90085 004 ***150.00

DOCUMENT # F00000006815	
1. Entity Name AMERICAN BURIAL AND CREMATION CENTERS, INC.	

Principal Place of Business 311 ELM STREET STE 1000 CINCINNATI, OH 45202 US	Mailing Address 259 YORKLAND ROAD TORONTO, ONTARIO CANADA, ON M2J 5-B2 XX
---	---

40105523

2. Principal Place of Business - No P.O. Box # 1929 Allen Parkway	3. Mailing Address 1929 Allen Parkway
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Houston TX	City & State Houston TX
Zip 77019	Zip 77019
Country US	Country US

03162007 Chg-P CR2E034 (12/06)

6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	--

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P HOUSTON, PAUL A 259 YORKLAND ROAD TORONTO, ONTARIO CANADA, XX M2J 5B2 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Pres CURTIS B. BRIGGS 1929 ALLEN PARKWAY HOUSTON TX 77019 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S NEEMAN, ELLEN 259 YORKLAND ROAD TORONTO, ONTARIO CANADA, XX M2J 5B2 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	SEC JUDITH M MARSHALL 1929 ALLEN PARKWAY HOUSTON TX 77019 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP COLLINS, RONALD G 259 YORKLAND ROAD TORONTO, ONTARIO CANADA, XX M2J 5B2 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	TREAS KEVIN J. GRATEK 1929 ALLEN PARKWAY HOUSTON TX 77019 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP MAYES, HERBERT A 326 WATER STREET RUTHLEDGE, TN 37861 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D TOTTLE, WILLIAM 259 YORKLAND ROAD TORONTO, ONTARIO CANADA, XX M2J 5B2 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS ANGELES, AZALEA 259 YORKLAND ROAD TORONTO, ONTARIO CANADA, XX M2J 5B2 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Kevin J. Gratek* TREASURER 4/25/07 Date 713-522-5141
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #