## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9700002654 (8)

WEST POINT CASKET COMPANY

Principal Place of Business Mailing Address 9430 OLD KATY ROAD, SUITE 300 9430 OLD KATY ROAD. SUITE 300 HOUSTON TX 77055 HOUSTON TX 77055

## **FILED** Feb 10 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/19/1997 Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 76-0535746 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Zip Country Zιρ Country 24 Personal Property Tax due June 30. 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent C T CORPORATION SYSTEM 81 Name 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 City 85 Zip Code 84 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 (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition 11 TITLE TITLE NUSS, ELDON P NAME 1.2 NAME CRZE034 9430 OLD KATY ROAD 1.3 STREET ADDRESS STREET ADDRESS **HOUSTON TX 77055** 1.4 CITY - ST-ZIP CITY-ST-ZIP DELETE Addition 2.1 TITLE TITLE BECK, DAVID F 22 NAME NAME 9430 OLD KATY ROAD 2.3 STREET ADDRESS STREET ADDRESS **HOUSTON TX 77055** 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELFTE Change Addition TITLE 3.1 TITLE WHEELER, ANTHONY C NAME 3.2 NAME 9430 OLD KATY ROAD 3.3 STREET ADDRESS STREET ADDRESS **HOUSTON TX 77055** 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4 2 NAME NAME STREET ADDRESS 43 STREET ADDRESS 44 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE 5 2 NAME NAME **5 3 STREET ADDRESS** STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST - ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 suppliemental 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

64 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

1/28/98

713484-5500

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