

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 04, 1999 8:00 am
Secretary of State

03-04-1999 90131 029 ***150.00

DOCUMENT # F97000002654

1. Corporation Name

WEST POINT CASKET COMPANY

Principal Place of Business

9430 OLD KATY ROAD, SUITE 300
HOUSTON TX 77055

Mailing Address

9430 OLD KATY ROAD, SUITE 300
HOUSTON TX 77055

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/19/1997

4. FEI Number
76-0535746

Applied For
Not Applicable

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

6. Election Campaign Financing ☐ \$5.00 May Be
Trust Fund Contribution Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

2. Principal Place of Business

2a. Mailing Address

21 8554 Katy Freeway
Suite, Apt. #, etc.

26 8554 Katy Freeway
Suite, Apt. #, etc.

22 # 200

27 # 200

23 Houston, TX
City & State

28 Houston, TX
City & State

24 77024 25 USA
Zip Country

29 77024 30 USA
Zip Country

9. Name and Address of Current Registered Agent

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

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 ☐ DELETE

TITLE PD
NAME NUSS, ELDON P
STREET ADDRESS 9430 OLD KATY ROAD
CITY-ST-ZIP HOUSTON TX 77055

TITLE VST
NAME BECK, DAVID F
STREET ADDRESS 9430 OLD KATY ROAD
CITY-ST-ZIP HOUSTON TX 77055

TITLE AS
NAME WHEELER, ANTHONY C
STREET ADDRESS 9430 OLD KATY ROAD
CITY-ST-ZIP HOUSTON TX 77055

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 8554 Katy Freeway #200
1.4 CITY-ST-ZIP Houston, TX 77024

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 8554 Katy Freeway #200
2.4 CITY-ST-ZIP Houston, TX 77024

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS 8554 Katy Freeway #200
3.4 CITY-ST-ZIP Houston, TX 77024

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

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, with all other like empowered.

SIGNATURE:

David F. Beck
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/1/99 (713) 984-5500
Date Daytime Phone #

CR2E034 (11/98)