

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000002724

1. Entity Name

CARRIAGE FUNERAL HOLDINGS, INC.

FILED

May 03, 2001 8:00 am
Secretary of State

05-03-2001 90090 027 ***150.00

Principal Place of Business

1300 POST OAK BLVD., #1500
HOUSTON TX 77056

Mailing Address

1300 POST OAK BLVD., #1500
HOUSTON TX 77056

2. Principal Place of Business

1900 ST. JAMES PLACE

3. Mailing Address

1900 ST. JAMES PLACE

Suite, Apt. #, etc.

4th Floor

Suite, Apt. #, etc.

4th Floor

City & State

Houston, TX

City & State

Houston, TX

Zip

77056

Country

USA

Zip

77056

Country

USA

4. FEI Number 76-0339922

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

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

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
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 PD ☒ Delete

NAME DUFFEY, MARK W
STREET ADDRESS 1300 POST OAK BLVD., #1500
CITY-ST-ZIP HOUSTON TX 77056

TITLE VPO ☒ Delete

NAME ALLEN, RUSSELL W
STREET ADDRESS 1300 POST OAK BLVD., #1500
CITY-ST-ZIP HOUSTON TX 77056

TITLE CFO ☐ Delete

NAME LIVENGOOD, THOMAS C
STREET ADDRESS 1300 POST OAK BLVD., #1500
CITY-ST-ZIP HOUSTON TX 77056

TITLE CEO ☐ Delete

NAME PAYNE, MELVIN C
STREET ADDRESS 1300 POST OAK BLVD., #1500
CITY-ST-ZIP HOUSTON TX 77056

TITLE OFC ☐ Delete

NAME SANFORD, TERRY E
STREET ADDRESS 1300 POST OAK BLVD, SUITE 15000
CITY-ST-ZIP HOUSTON TX 77056

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☒ Addition

NAME MARSHA MORRIS
STREET ADDRESS 1900 ST. JAMES PLACE, 4th Floor
CITY-ST-ZIP HOUSTON, TX 77056

TITLE ☐ Change ☒ Addition

NAME JAY D. DODDS
STREET ADDRESS 1900 ST. JAMES PLACE, 4th Floor
CITY-ST-ZIP HOUSTON, TX 77056

TITLE ☒ Change ☐ Addition

NAME V. D. CROSBY
STREET ADDRESS THOMAS C. LIVENGOOD
CITY-ST-ZIP 1900 ST. JAMES PLACE, 4th Floor
HOUSTON, TX 77056

TITLE ☒ Change ☐ Addition

NAME P. CEO, D. C.
STREET ADDRESS MELVIN C. PAYNE
CITY-ST-ZIP 1900 ST. JAMES PLACE, 4th Floor
HOUSTON, TX 77056

TITLE ☒ Change ☐ Addition

NAME
STREET ADDRESS 1900 ST. JAMES PLACE, 4th Floor
CITY-ST-ZIP HOUSTON, TX 77056

TITLE ☐ Change ☒ Addition

NAME TIMOTHY R. MCBROOM
STREET ADDRESS 1900 ST. JAMES PLACE, 4th Floor
CITY-ST-ZIP HOUSTON, TX 77056

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/01

Date

713-332-8400

Daytime Phone #

CR2E034 (10/00)