

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 21, 2002 8:00 am**  
**Secretary of State**

04-21-2002 90934 001 \*5,700.00

**DOCUMENT # G13435**

1. Entity Name

**BRUCE OCALA FUNERAL HOME, INC.**

Principal Place of Business

**2739 SE MARICAMP RD  
OCALA FL 32671**

Mailing Address

**1201 S ORLANDO AVE  
SUITE 365  
WINTER PARK FL 32789  
US**

2. Principal Place of Business

3. Mailing Address

**ATTN: SALT**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**P.O. Box 11250**

City & State

**New Orleans, LA**

4. FEI Number

**59-2256460**

Applied For

Not Applicable

Zip

Country

Zip

**70181-1250**

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM  
1200 PINE ISLAND ROAD  
PLANTATION FL 33324**

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, 2002 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete  
NAME **PAS**  
STREET ADDRESS **KNOPKE, KEENAN L**  
CITY-ST-ZIP **1201 S ORLANDO AVE, SUITE 365  
WINTER PARK FL 32789**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME **ASD**  
STREET ADDRESS **BUDDE, KENNETH C**  
CITY-ST-ZIP **110 VETERANS MEMORIAL BLVD  
METAIRIE LA 70005**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME **TS**  
STREET ADDRESS **FRIOU, THOMAS H**  
CITY-ST-ZIP **1201 S ORLANDO AVE, SUITE 365  
WINTER PARK FL 32789**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME **DVAS**  
STREET ADDRESS **HEFFRON, BRENT F**  
CITY-ST-ZIP **1201 S ORLANDO AVE, #365  
WINTER PARK FL 32789**

TITLE ☐ Change ☐ Addition  
NAME **Not a "Director"**  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME **D**  
STREET ADDRESS **ROWE, WILLIAM E**  
CITY-ST-ZIP **110 VETERANS MEM BLVD  
METAIRIE LA 70005**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME **AS**  
STREET ADDRESS **TRAHAN, LORALICE A**  
CITY-ST-ZIP **110 VETERANS MEM BLVD  
METAIRIE LA 70005**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*Lisa J. Winnickoff*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*2/14/02*  
Date

504-837-5880  
Daytime Phone #

*Lisa T. Winnickoff, Asst. Secretary*

CR2E034 (9/01)

# Attachment #

Bruce Ocala Funeral Home, Inc.  
2002 Florida Uniform Business Report  
Document # G13435

## Officers

<u>Name</u>	<u>Title</u>	<u>Address</u>
Keenan L. Knopke	President and Assistant Secretary	1201 S. Orlando Ave., Suite 365, Winter Park, FL 32789
Brent F. Heffron	Executive Vice Pres./Asst. Sec.	1201 S. Orlando Ave., Suite 365, Winter Park, FL 32789
William E. Rowe	Vice President	110 Veterans Memorial Blvd., Metairie, LA 70005
Brian J. Marlowe	Vice President	110 Veterans Memorial Blvd., Metairie, LA 70005
Thomas H. Friou	Secretary and Treasurer	1201 S. Orlando Ave., Suite 365, Winter Park, FL 32789
Loralice A. Trahan	Asst. Secretary/Asst. Treasurer	110 Veterans Memorial Blvd., Metairie, LA 70005
Kenneth C. Budde	Asst. Secretary/Asst. Treasurer	110 Veterans Memorial Blvd., Metairie, LA 70005
Lisa T. Winningkoff	Asst. Secretary/Asst. Treasurer	110 Veterans Memorial Blvd., Metairie, LA 70005

## Directors

<u>Name</u>	<u>Address</u>
William E. Rowe	110 Veterans Memorial Blvd., Metairie, LA 70005
Kenneth C. Budde	110 Veterans Memorial Blvd., Metairie, LA 70005
Brian J. Marlowe	110 Veterans Memorial Blvd., Metairie, LA 70005