## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# G34613

FILED Apr 20, 2009 Secretary of State

Entity Name: FUNERAL SERVICES ACQUISITION GROUP, INC.

Surrent P	rincipal Place	e of Business:	New Princi	pal Place of Business:
	DIXIE HWY BEACH, FL 33	160 US		
Current Mailing Address:		New Mailing Address:		
PO BOX 1 9TH FLR HOUSTON	30548 N, TX 7721909	548		
El Number	: 59-2286868	FEI Number Applied For ( )	FEI Number Not Appli	cable ( ) Certificate of Status Desired ( )
Name and	d Address of (	Current Registered Agent:	Name and	Address of New Registered Agent:
1201 HAY	S STREET SSEE, FL 323	CE COMPANY 6012525 US		
		submits this statement for the	purpose of changing its	s registered office or registered agent, or both,
n the State	e of Fiorida.			
n the State SIGNATUI				
	RE:	nic Signature of Registered A	gent	Date
SIGNATUI	RE: Electro	nic Signature of Registered A	gent	Date
SIGNATUI	RE: Electro	g Trust Fund Contribution ( ).		Date 6/CHANGES TO OFFICERS AND DIRECTOR
SIGNATUI	RE: Electrol mpaign Financin S AND DIREC	g Trust Fund Contribution ( ). CTORS: ) Delete BLE L ARKWAY		
Election Car  OFFICER: Vitle: Vame: Address:	RE: Electron  mpaign Financin  S AND DIRECT  PD ( LONGINO, NO 1929 ALLEN P HOUSTON, TX	Trust Fund Contribution ( ).  CTORS:  ) Delete BLE L  ARKWAY  77019  ) Delete TIS G  ARKWAY	ADDITION: Title: Name: Address:	S/CHANGES TO OFFICERS AND DIRECTOR
Election Car DFFICER: Title: Jame: Address: City-St-Zip: Title: Jame: Address:	RE: Electron  mpaign Financin  S AND DIRECT  PD ( LONGINO, NO 1929 ALLEN P HOUSTON, TX  V ( BRIGGS, CUR 1929 ALLEN P HOUSTON, TX	g Trust Fund Contribution ( ).  CTORS:  ) Delete BLE L ARKWAY 77019  ) Delete TIS G PARKWAY 77019 US  ) Delete ARKWAY	ADDITIONS Title: Name: Address: City-St-Zip: Title: Name: Address:	S/CHANGES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MYRTLE L. JONES TREA 04/20/2009