


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2006 8:00 am
Secretary of State

05-04-2006 90515 001 *4,950.00

| | | | | | |
|--|--|---|--|--|--------------------------------|
| DOCUMENT # K79698 1. Entity Name TURNER CREMATORY, INC. | | | |  | |
| Principal Place of Business 14360 SPRING HILL DR. SPRING HILL, FL 34609 US | | | Mailing Address ATTN : SALT PO BOX 11250 NEW ORLEANS, LA 70181-1250 US | | |
| 2. Principal Place of Business | | 3. Mailing Address | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | |
| City & State | | City & State | | 4. FEI Number 59-2992267 | |
| Zip | Country | Zip | Country | 5. Certificate of Status Desired <input type="checkbox"/> \$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 RD PLANATION, 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. I am familiar with, and accept the obligations of registered agent. | | | | | |
| SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small> | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | | | |
| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PAS YENT, JR., JACK 1201 S ORLANDO AVENUE, SUITE 365 WINTER PARK, FL 32789 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | See attached list | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VAS HEFFRON, BRENT F 1201 S ORLANDO AVENUE, SUITE 365 WINTER PARK, FL 32789 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | ASAT KITCHEN, THOMAS 1333 S CLEARVIEW PARKWAY JEFFERSON, LA 70121 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V HYMEL, MICHAEL G 1333 S CLEARVIEW PARKWAY JEFFERSON, LA 70121 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | ASD BUDDE, KENNETH C 110 VETERANS MEMORIAL BLVD METAIRIE, LA 70005 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TS FRIOU, THOMAS H 1201 S ORLANDO AVENUE, SUITE 365 WINTER PARK, FL 32789 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | | | | | |
| SIGNATURE: <u>Michael G. Hymel</u> Michael G. Hymel, Vice Pres | | | | | |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | | | <small>Date</small> | | <small>Daytime Phone #</small> |

66014723



04042006 Chg-P CR2E034 (11/05)

Applied For
Not Applicable

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

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

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SIGNATURE: Michael G. Hymel Michael G. Hymel, Vice Pres **4-23-06 504 729 1400**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

ATTACHMENT
ATTACHMENT

66014983
#K79698

TURNER CREMATORY, INC.

Officer Names and Addresses

| | | |
|----------------------|--------------------------|--|
| Mark A. Panter | President/Asst Secretary | 5101 Nebraska Ave., Tampa, FL 33603 |
| Brent F. Heffron | Exec Vice Pres/Asst Sec | 6010 White Horse Rd., Greenville, SC 29611 |
| Michael G. Hymel | Vice President | 1333 S. Clearview Parkway, Jefferson, LA 70121 |
| Stephen M. Lynch | Vice Pres/Sec/Treas | 6010 White Horse Rd., Greenville, SC 29611 |
| Kenneth C. Budde | Vice President | 1333 S. Clearview Parkway, Jefferson, LA 70121 |
| Thomas M. Kitchen | Asst Sec/Asst Treas | 1333 S. Clearview Parkway, Jefferson, LA 70121 |
| Lewis J. Derbes, Jr. | Asst Sec/Asst Treas | 1333 S. Clearview Parkway, Jefferson, LA 70121 |

Director Names and Addresses

| | | |
|---------------------|----------|--|
| Thomas M. Kitchen | Director | 1333 S. Clearview Parkway, Jefferson, LA 70121 |
| Kenneth C. Budde | Director | 1333 S. Clearview Parkway, Jefferson, LA 70121 |
| Everett N. Kendrick | Director | 1333 S. Clearview Parkway, Jefferson, LA 70121 |