

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 05, 2006 8:00 am
Secretary of State

04-05-2006 90021 047 ****50.00

DOCUMENT # L02000030609

1. Entity Name
FOUNTAINHEAD MEMORIAL PARK, LLC



Principal Place of Business
**1929 ALLEN PARKWAY
HOUSTON, TX 77019**

Mailing Address
**P.O. BOX 130548
HOUSTON, TX 77219-0548**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02132006 Chg-LLC CR2E083 (11/05)

4. FEI Number
59-1088279

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE P ☐ Delete
NAME LONGINO, NOBLE L
STREET ADDRESS 1929 ALLEN PKWY
CITY-ST-ZIP HOUSTON, TX 77019

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

TITLE VP ☐ Delete
NAME BRIGGS, CURTIS G
STREET ADDRESS 1929 ALLEN PKWY
CITY-ST-ZIP HOUSTON, TX 77019

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

TITLE S ☐ Delete
NAME MARSHALL, JUDITH M
STREET ADDRESS 1929 ALLEN PKWY
CITY-ST-ZIP HOUSTON, TX 77019

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

TITLE T ☒ Delete
NAME LORING, HARRIS E III
STREET ADDRESS 1929 ALLEN PKWY
CITY-ST-ZIP HOUSTON, TX 77019

TITLE ☒ Change ☐ Addition
NAME **MARK EVANS**
STREET ADDRESS **1929 ALLEN PARKWAY**
CITY-ST-ZIP **HOUSTON TX 77019**

TITLE MGR ☐ Delete
NAME GARRETT, SUSAN L
STREET ADDRESS 1929 ALLEN PKWY
CITY-ST-ZIP HOUSTON, TX 77019

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

TITLE MGR ☐ Delete
NAME LONGINO, NOBLE L
STREET ADDRESS 1929 ALLEN PKWY
CITY-ST-ZIP HOUSTON, TX 77019

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

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: **MARK EVANS**

TREASURER

3/23/06

713-522-5141

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #