

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000105959

**FILED**  
**Jan 11, 2010**  
**Secretary of State**

**Entity Name:** GENESIS FUNERAL CENTER AND \$495 CREMATIONS, LLC

**Current Principal Place of Business:**

5749 PEMBROKE ROAD  
HOLLYWOOD, FL 33023

**New Principal Place of Business:**

**Current Mailing Address:**

5749 PEMBROKE ROAD  
HOLLYWOOD, FL 33023

**New Mailing Address:**

**FEI Number:** 26-3707506

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RAY, PAUL E JR  
5749 PEMBROKE ROAD  
HOLLYWOOD, FL 33023 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** PRES  
**Name:** RAY, PAUL E JR  
**Address:** 5749 PEMBROKE ROAD  
**City-St-Zip:** HOLLYWOOD, FL 33023

**Title:** VP  
**Name:** VARGAS, LYDZAMADIA  
**Address:** 410 NW 65TH TER  
**City-St-Zip:** MARGATE, FL 33063

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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:** PAUL E. RAY JR.

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01/11/2010

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Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date