

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000000906

FILED  
Feb 16, 2005  
Secretary of State

Entity Name: BROOKE FUNERAL SERVICES COMPANY, LLC

**Current Principal Place of Business:**

10950 GRANDVIEW, SUITE 600  
OVERLAND PARK, KS 66210

**New Principal Place of Business:**

**Current Mailing Address:**

10950 GRANDVIEW, SUITE 600  
OVERLAND PARK, KS 66210

**New Mailing Address:**

FEI Number: 30-0218960

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GRUBBA, GERALD  
101 FEDERAL PLACE, SUITE 101  
TARPON SPRINGS, FL 34689 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/MEMBERS:**

Title: P ( ) Delete  
Name: LOWRY, SHAWN  
Address: 10950 GRANDVIEW DR., SUITE 600  
City-St-Zip: OVERLAND PARK, KS 66210

Title: VPST ( ) Delete  
Name: DEVLIN, DANE  
Address: 10950 GRANDVIEW DR., SUITE 600  
City-St-Zip: OVERLAND PARK, KS 66210

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: LOWRY, SHAWN T  
Address: 10950 GRANDVIEW DR., SUITE 600  
City-St-Zip: OVERLAND PARK, KS 66210

Title: MGRM (X) Change ( ) Addition  
Name: DEVLIN, DANE  
Address: 10950 GRANDVIEW DR., SUITE 600  
City-St-Zip: OVERLAND PARK, KS 66210

Title: MGRM ( ) Change (X) Addition  
Name: GARST, KYLE VP  
Address: 10950 GRANDVIEW DR., SUITE 600  
City-St-Zip: OVERLAND PARK, KS 66210

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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: SHAWN T. LOWRY

MGRM

02/16/2005

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