

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 12, 2001 8:00 am**  
**Secretary of State**  
03-12-2001 90451 046 \*\*\*150.00

**DOCUMENT # P92000011858**

1. Entity Name

**JEWISH MEMORIAL SOCIETY, INC.**

Principal Place of Business

**111 SKOKIE BLVD  
WILMETTE IL 60091**

Mailing Address

**4126 NORLAND AVE.  
BURNABY BC.. CANADA V5G 3S8**

2. Principal Place of Business

3. Mailing Address

**2225 SHEPPARD AVENUE EAST**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**ATRIA NORTH III - 11TH FLOOR**

City & State

City & State  
**TORONTO, ONTARIO**

4. FEI Number **36-3858967**

Applied For

Not Applicable

Zip

Country

Zip  
**M2J 5B5**

Country  
**CANADA**

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION 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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00  
After MAY 1, 2001 Fee will be \$550.00  
Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<b>C</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>WEINSTEIN, JOEL W</b>	
STREET ADDRESS	<b>111 SKOKIE BLVD.</b>	
CITY-ST-ZIP	<b>WILMETTE IL 60091</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>WEEDON, MICHAEL G</b>	
STREET ADDRESS	<b>4126 NORLAND AVENUE</b>	
CITY-ST-ZIP	<b>BURNABY,B.C.,CANADA</b>	
TITLE	<b>VP</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>WEINSTEIN, MARK</b>	
STREET ADDRESS	<b>111 SKOKIE BLVD</b>	
CITY-ST-ZIP	<b>WILMETTE IL 60091</b>	
TITLE	<b>V</b>	<input type="checkbox"/> Delete
NAME	<b>HYNDMAN, PETER S.</b>	
STREET ADDRESS	<b>4126 NORLAND AVE.</b>	
CITY-ST-ZIP	<b>BURNABY BC., CANADA V5G 3S8</b>	
TITLE	<b>P</b>	<input type="checkbox"/> Delete
NAME	<b>WEINSTEIN, ROBERT A.</b>	
STREET ADDRESS	<b>24100 N HWY 45</b>	
CITY-ST-ZIP	<b>VERNON HILLS IL 60061-3180</b>	
TITLE	<b>VP</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>CASHNER, JEFFREY L</b>	
STREET ADDRESS	<b>3205 WEST DAVIS STE 200A</b>	
CITY-ST-ZIP	<b>CONROE TX 77304</b>	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	<b>SEE ATTACHED LIST OF ALL DIRECTORS AND OFFICERS</b>	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<b>DAS</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

(Peter S. Hyndman)

March 6, 2001

(416) 498-2451

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

ATTACHMENT Doc # 1248000011858  
List of Active Officers and Directors  
C0038905

**Jewish Memorial Society, Inc.**

<u>Director</u>	<u>Title</u>
Peter S. Hyndman	Director
Michael G. Weedon	Director
<u>Officer</u>	<u>Title</u>
Ronald P. Gushulak	Assistant Secretary
Joseph T. Hardiman	Secretary
	Treasurer
Dwight K. Hawes	Vice-President
Peter S. Hyndman	Vice-President
	Assistant Secretary
Robert A. Weinstein	President

Peter S. Hyndman

Business: The Loewen Group Inc.  
4126 Norland Avenue  
Burnaby, BC V5G 3S8

Michael G. Weedon

Business: The Loewen Group Inc.  
4126 Norland Avenue  
Burnaby, BC V5G 3S8

Ronald P. Gushulak

Business: Loewen Group International, Inc.  
Suite 1000, 311 Elm Street  
Cincinnati, OH 45202

Joseph T. Hardiman

Business: Loewen Group International, Inc.  
311 Elm Street  
Cincinnati, OH 45202

Dwight K. Hawes

Business: The Loewen Group Inc.  
4126 Norland Avenue  
Burnaby, BC V5G 3S8

Robert A. Weinstein

Business: 24100 N. Highway 45  
Vernon Hills, IL 60061-3180