

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Feb 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000001765 (5)

1. Corporation Name
MEMORIAL PLANS, INC.

Principal Place of Business

8350 NW 52 TERR
20
MIAMI FL 33166
US

Mailing Address

1929 ALLEN PARKWAY
9TH FLOOR DEPT 2934
HOUSTON TX 77019
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/04/1993

4. FEI Number

65-0379645

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

THE PRENTICE HALL CORPORATION SYSTEM, INC.
110 N. MAGNOLIA STREET
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME BANGO, FRANK
STREET ADDRESS DPT 2934 9TH FL 1929 ALLEN PKWY
CITY-ST-ZIP HOUSTON TX 77019 ☐ DELETE

TITLE V
NAME SOTOLONGO, CESAR A
STREET ADDRESS DPT 2934 9TH FL 1929 ALLEN PKWY
CITY-ST-ZIP HOUSTON TX 77019 ☐ DELETE

TITLE DST
NAME GOFF, JOAN B
STREET ADDRESS 1929 ALLEN PKWY.
CITY-ST-ZIP HOUSTON TX 77019 ☐ DELETE

TITLE V
NAME PLANAS, RAUL
STREET ADDRESS DPT 2934 9TH FL 1929 ALLEN PKWY
CITY-ST-ZIP HOUSTON TX 77019 ☐ DELETE

TITLE D
NAME CLAIBORNE, TIMOTHY J
STREET ADDRESS DEPT 2934 9TH FLOOR 1929 ALLEN PARKWAY
CITY-ST-ZIP HOUSTON TX 77019 ☐ DELETE

TITLE S
NAME FRAZIER, MARY J
STREET ADDRESS DEPT 2934 9TH FLOOR 1929 ALLEN PARKWAY
CITY-ST-ZIP HOUSTON FL 77019 ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE VP
2.2 NAME TIMOTHY J. CLAIBORNE
2.3 STREET ADDRESS 1929 ALLEN PARKWAY, 9TH FL
2.4 CITY-ST-ZIP HOUSTON TX 77019 ☒ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE VP
4.2 NAME KENNETH W. CONKLIN
4.3 STREET ADDRESS 1929 ALLEN PARKWAY, 9TH FL
4.4 CITY-ST-ZIP HOUSTON, TX 77019 ☒ Change ☐ Addition

5.1 TITLE DIRECTOR
5.2 NAME SUZANNE DINEFF
5.3 STREET ADDRESS 1929 ALLEN PARKWAY, 9TH FL
5.4 CITY-ST-ZIP HOUSTON TX 77019 ☒ Change ☐ Addition

6.1 TITLE DIRECTOR
6.2 NAME LISA M. NEWBURN
6.3 STREET ADDRESS 1929 ALLEN PARKWAY, 9TH FL
6.4 CITY-ST-ZIP HOUSTON TX 77019 ☒ Change ☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

JOAN B. GOFF/SECRETARY

713/522-5141

CR2E034 (10/97)