

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P95000009950**

1. Entity Name

CURRY RALEY FUNERAL HOME, INC.**FILED**
Mar 12, 2001 8:00 am
Secretary of State

03-12-2001 90451 037 ***150.00

Principal Place of Business
**404 WEST PALMETTO STREET
WAUCHULA FL 33873**Mailing Address
**4126 NORLAND AVE.
BURNABY BC. CANADA V5G 3S8****C0032914**

DO NOT WRITE IN THIS SPACE

| | | | |
|--------------------------------|--|---------------------|--|
| 2. Principal Place of Business | | 3. Mailing Address | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | | Country | |

| | | |
|---|-------------------|---------------------------------------|
| 4. FEI Number | 65-0586907 | Applied For |
| | | Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | | \$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 |
| State |
| 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) DATE9. 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 State10. 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 | V <input type="checkbox"/> Delete | TITLE | ASD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | HYNDMAN, PETER S. | NAME | |
| STREET ADDRESS | 4126 NORLAND AVE. | STREET ADDRESS | |
| CITY-ST-ZIP | BURNABY BC., CANADA V5G 3S8 | CITY-ST-ZIP | |
| TITLE | P <input checked="" type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | CASHNER, JEFFREY L | NAME | SEE ATTACHED LIST OF ALL DIRECTORS AND OFFICERS |
| STREET ADDRESS | 3205 W DAVIS STE 200A | STREET ADDRESS | |
| CITY-ST-ZIP | CONROE TX 77304 | CITY-ST-ZIP | |
| TITLE | V <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | RUSSELL, ROBERT D. | NAME | |
| STREET ADDRESS | 200 N. FEDERAL HWY. | STREET ADDRESS | |
| CITY-ST-ZIP | POMPANO BCH. FL 33062 | CITY-ST-ZIP | |
| TITLE | ST <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | HARDIMAN, JOSEPH T | NAME | |
| STREET ADDRESS | 311 ELM STREET STE 1000 | STREET ADDRESS | |
| CITY-ST-ZIP | CINCINNATI OH 45202 | CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | 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)

C.6038914

List of Active Officers and Directors:

| <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 |
| Paul A. Houston | President |
| Peter S. Hyndman | Vice-President |
| | Assistant Secretary |
| Robert D. Russell | Vice-President |
| F. Duane Schaefer | Vice-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

Paul A. Houston

Business: 2225 Sheppard Avenue East
Atria North III - 11th Floor
Toronto, ONT M2J 5B5

Robert D. Russell

Business: 200 North Federal Highway
Pompano Beach, FL 33062

F. Duane Schaefer

Business: 2420 Fannin Street
Houston, TX 77002