

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 05, 2003 8:00 am**  
**Secretary of State**

05-05-2003 90926 001 \*5,550.00

0652980 AT

**DOCUMENT # P95000049923**

1. Entity Name

TRINITY MEMORIAL GARDENS OF LAKE LAND, INC.



Principal Place of Business

43889 U.S. HIGHWAY 1 NORTH

TARPON SPRINGS FL 34689

3350 Mail Hill Road  
Lakeland, FL 33810

Mailing Address

ATTN : SALT

PO BOX 11250

NEW ORLEANS LA 70181-1250

US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3325758

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution.

☐ \$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PAS KNOPKE, KEENAN L 1201 S ORLANDO AVE STE 365 WINTER PARK FL 32789	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS HEFFRON, BRENT F 1201 S ORLANDO AVE STE 365 WINTER PARK FL 32789	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS FRIOU, THOMAS H 1201 S ORLANDO AVE STE 365 WINTER PARK FL 32789	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASD BUDD, KENNETH C 110 VETERANS MEMORIAL BLVD METAIRIE LA 70005	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROWE, WILLIAM E 110 VETERANS MEMORIAL BLVD METAIRIE LA 70005	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS TRAHAN, LORALICE A 110 VETERANS MEMORIAL BLVD METAIRIE LA 70005	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
See attached sheet for complete list of Officers/Directors	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*SIGNATURE REQUIRED*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Loralice A. Trahan

Assistant Secretary

4/30/03

Date

504-837-5080

Daytime Phone #

CR2E034 (10/02)

# ATTACHMENT

Trinity Memorial Gardens of Lakeland, Inc.

2003 For Profit Corporation Uniform Business Report (UBR)

Document # P95000049923

55037475

## Officers

<b>Name</b>	<b>Title</b>	<b>Address</b>
Mark A. Panter	President/Asst Sec	5101 N. Nebraska Ave., Tampa, FL 33603
Brent F. Heffron	Exec Vice President/Asst Sec	1201 S. Orlando Ave., Suite 365, Winter Park, FL 32789
William E. Rowe	Vice President	110 Veterans Memorial Blvd., Metairie, LA 70005
Brian J. Marlowe	Vice President	110 Veterans Memorial Blvd., Metairie, LA 70005
Thomas H. Friou	Secretary and Treasurer	1201 S. Orlando Ave., Suite 365, Winter Park, FL 32789
Loralice A. Trahan	Asst. Secretary/Asst. Treasurer	110 Veterans Memorial Blvd., Metairie, LA 70005
Kenneth C. Budde	Asst. Secretary/Asst. Treasurer	110 Veterans Memorial Blvd., Metairie, LA 70005

## Directors

<b>Name</b>	<b>Address</b>
William E. Rowe	110 Veterans Memorial Blvd., Metairie, LA 70005
Brian J. Marlowe	110 Veterans Memorial Blvd., Metairie, LA 70005
Kenneth C. Budde	110 Veterans Memorial Blvd., Metairie, LA 70005