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FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90052 002 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000045095

1. Corporation Name
FM CEMETERY, INC.

8179

Principal Place of Business

1350 W FAIRBANKS AVE
WINTER PARK FL 32789
US

Mailing Address

1929 ALLEN PKWY
DPT 2934 9TH FL
HOUSTON TX 77019
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/28/1996

4. FEI Number

76-0505094

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 the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME FRANK BANGO
STREET ADDRESS 1929 ALLEN PKWY., 9TH FLOOR
CITY-ST-ZIP HOUSTON TX 77019

1.1 TITLE

PRESIDENT

☒ Change ☐ Addition

NAME

STREET ADDRESS 1929 ALLEN PKWY., 9TH FLOOR
CITY-ST-ZIP HOUSTON TX 77019

1.2 NAME

JOSEPH A. BRANDENBURG

1.3 STREET ADDRESS

1929 ALLEN PARKWAY

1.4 CITY-ST-ZIP

HOUSTON TX 77019

TITLE VP ☐ DELETE

NAME TIMOTHY J. CLAIBORNE
STREET ADDRESS 1929 ALLEN PKWY., 9TH FLOOR
CITY-ST-ZIP HOUSTON TX 77019

2.1 TITLE

☐ Change ☐ Addition

NAME

STREET ADDRESS 1929 ALLEN PKWY., 9TH FLOOR
CITY-ST-ZIP HOUSTON TX 77019

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE D ☐ DELETE

NAME SUZANNE DINEFF
STREET ADDRESS 1929 ALLEN PKWY., 9TH FLOOR
CITY-ST-ZIP HOUSTON TX 77019

3.1 TITLE

☐ Change ☐ Addition

NAME

STREET ADDRESS 1929 ALLEN PKWY., 9TH FLOOR
CITY-ST-ZIP HOUSTON TX 77019

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE V ☐ DELETE

NAME CONKLIN, FRANK W
STREET ADDRESS DEPT 2934 9TH FLOOR 1929 ALLEN PARKWAY
CITY-ST-ZIP HOUSTON TX 77019

4.1 TITLE

☐ Change ☐ Addition

NAME

STREET ADDRESS DEPT 2934 9TH FLOOR 1929 ALLEN PARKWAY
CITY-ST-ZIP HOUSTON TX 77019

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE STD ☒ DELETE

NAME GOFF, JOAN B
STREET ADDRESS DEPT 2934 9TH FLOOR 1929 ALLEN PARKWAY
CITY-ST-ZIP HOUSTON TX 77019

5.1 TITLE

TREASURER

☐ Change ☒ Addition

NAME

STREET ADDRESS DEPT 2934 9TH FLOOR 1929 ALLEN PARKWAY
CITY-ST-ZIP HOUSTON TX 77019

5.2 NAME

JOHN H. LOHMAN, JR.

5.3 STREET ADDRESS

1929 ALLEN PARKWAY

5.4 CITY-ST-ZIP

HOUSTON TX 770

TITLE D ☐ DELETE

NAME LISA M. NEWBURN
STREET ADDRESS 1929 ALLEN PKWY., 9TH FLOOR
CITY-ST-ZIP HOUSTON TX 77019

6.1 TITLE

☐ Change ☐ Addition

NAME

STREET ADDRESS 1929 ALLEN PKWY., 9TH FLOOR
CITY-ST-ZIP HOUSTON TX 77019

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE:

JOHN H. LOHMAN, JR.

713/522-5141

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)