

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sarwa B. Morhart
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 24 PM 1:26

DOCUMENT # 018300 (4)

1. Corporation Name
WOODLAWN MEMORY GARDENS, INC.

Principal Place of Business Mailing Address
1201 SOUTH ORLANDO AVENUE SUITE 365
WINTER PARK FL 32789 WINTER PARK FL 32789

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 06/09/1948 3a. Date of Last Report 06/03/1994

4. FEI Number 62-1506528 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 has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 24 Country 25 28 Zip 29 Country 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BALDWIN, RICHARD O. JR.
1201 SOUTH ORLANDO AVENUE
SUITE 365
WINTER PARK 32789

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 reconstituting)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VD
NAME BALDWIN, RICHARD O
STREET ADDRESS 1201 S ORLANDO AVE #365
CITY-ST-ZIP WINTER PARK FL
TITLE V
NAME YENT, JACK G JR
STREET ADDRESS 4207 E LAKE AVE
CITY-ST-ZIP TAMPA FL
TITLE V
NAME SAGARO, JUAN
STREET ADDRESS 4207 E LAKE AVE
CITY-ST-ZIP TAMPA FL
TITLE AS
NAME BUDE, KENNETH C
STREET ADDRESS 110 VETERANS BLVD
CITY-ST-ZIP METAIRIE LA
TITLE DC
NAME STEWART, FRANK B JR
STREET ADDRESS 110 VETERANS BLVD
CITY-ST-ZIP METAIRIE LA
TITLE VS
NAME OLVEY, CORINNE L
STREET ADDRESS 1201 S ORLANDO AVE, #365
CITY-ST-ZIP WINTER PARK FL

1.1 TITLE V/D Change Addition
1.2 NAME William E. Rowe
1.3 STREET ADDRESS 110 Veterans Blvd.
1.4 CITY-ST-ZIP Metairie, LA 70005
2.1 TITLE P Change Addition
2.2 NAME Jeffrey E. Butler
2.3 STREET ADDRESS 2860 Sunset Point Road
2.4 CITY-ST-ZIP Clearwater, FL
3.1 TITLE V Change Addition
3.2 NAME Terry Young
3.3 STREET ADDRESS 2860 Sunset Point Road
3.4 CITY-ST-ZIP Clearwater, FL
4.1 TITLE V/T Change Addition
4.2 NAME Frank L. Matasavage
4.3 STREET ADDRESS 2400 Harrell Road
4.4 CITY-ST-ZIP Orlando, FL 32817
5.1 TITLE V Change Addition
5.2 NAME Raymond C. Knopke, Jr.
5.3 STREET ADDRESS 1201 S. Orlando Ave., Suite 365
5.4 CITY-ST-ZIP Winter Park, FL 32789
6.1 TITLE AS Change Addition
6.2 NAME Ronald H. Patron
6.3 STREET ADDRESS 110 Veterans Blvd.
6.4 CITY-ST-ZIP Metairie, LA

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes; I further certify that the information collected 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 13 or 14 if changed, or on an attachment with an address.

SIGNATURE: Corinne J. Olvey 2/16/95 407-740-7000
CORINNE J. OLVEY Date Signature (Print Name)