

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

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 01 1996 8:00 am
Secretary of State

DOCUMENT # **018300** (4)

1. Corporation Name
WOODLAWN MEMORY GARDENS, INC.

000001869380
-06/20/96--01040--010
***200.00

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

3. Date Incorporated or Qualified: 06/09/1948
3a. Date of Last Report: 03/24/1995
4. FEI Number: 62-1506528
5. Certificate of Status Desired: Applied For Not Applicable
6. Election Campaign Financing Trust Fund Contribution: \$8.75 Additional Fee Required
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No \$5.00 May Be Added to Fees

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

9. Name and Address of Current Registered Agent
~~BALDWIN, RICHARD O. JR.~~
~~1201 SOUTH ORLANDO AVENUE~~
~~SUITE 365~~
~~WINTER PARK 32789~~

10. Name and Address of New Registered Agent
81 Name: RAYMOND C. KNOPKE, JR.
82 Street Address (P.O. Box Number is Not Acceptable): 1201 S. ORLANDO AVE.
83 SUITE 365
84 City: WINTER PARK FL 85 32789

11. Pursuant to the provisions of Sections 607.0503 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 607.0503, Florida Statutes.
SIGNATURE: *Richard O. Baldwin* DATE: 4/29/96

12. OFFICERS AND DIRECTORS

TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	BALDWIN, RICHARD O	
STREET ADDRESS	1201 S ORLANDO AVE #365	
CITY-ST-ZIP	WINTER PARK FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	BUTLER, JEFFREY E	
STREET ADDRESS	2860 SUNSET POINT ROAD	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	YOUNG, TERRY	
STREET ADDRESS	2860 SUNSET POINT ROAD	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	BUDDE, KENNETH C	
STREET ADDRESS	110 VETERANS BLVD	
CITY-ST-ZIP	METAIRIE LA	
TITLE	DC	<input checked="" type="checkbox"/> DELETE
NAME	STEWART, FRANK B JR	
STREET ADDRESS	110 VETERANS BLVD	
CITY-ST-ZIP	METAIRIE LA	
TITLE	VS	<input type="checkbox"/> DELETE
NAME	OLVEY, CORINNE L	
STREET ADDRESS	1201 S ORLANDO AVE, #365	
CITY-ST-ZIP	WINTER PARK FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME	Raymond C. Knopke, Jr.	
13 STREET ADDRESS	1201 S. Orlando Ave Suite 365	
14 CITY-ST-ZIP	Winter Park, FL 32789	
21 TITLE	VP/T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME	Frank L. Matasavage	
23 STREET ADDRESS	2400 Harrell Road	
24 CITY-ST-ZIP	Orlando, FL 32817	
31 TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32 NAME	Janice L. Rhodus	
33 STREET ADDRESS	737 Main Street	
34 CITY-ST-ZIP	Safety Harbour, FL 34695	
41 TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
42 NAME	James A. Hora	
43 STREET ADDRESS	2400 Harrell Road	
44 CITY-ST-ZIP	Orlando, FL 32817	
51 TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
52 NAME	Mark A. Panter	
53 STREET ADDRESS	4207 E. Lake Ave	
54 CITY-ST-ZIP	Tampa, FL 33610	
61 TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
62 NAME	Scarlett A. Brown	
63 STREET ADDRESS	737 Main Street	
64 CITY-ST-ZIP	Safety Harbour, FL 34695	

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 119.07(3)(k), 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: *Corinne I. Olvey* Corinne I. Olvey, VP/S DATE: 4/29/96 407/740-7000

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WOODLAWN MEMORY GARDENS, INC.

BLOCK 13 - CONTINUED - ADDITIONS/CHANGES TO THE OFFICERS LISTED IN BLOCK 12

The following are additional Officer(s) of this corporation as space was not available in Block 13 of the original form completed:

- | | | |
|------|---|--|
| AS | Ronald H. Patron
110 Veterans Blvd.
Metairie, LA 70005 | Addition <input checked="" type="checkbox"/> |
| D | Joseph P. Henican, III.
110 Veterans Blvd.
Metairie, LA 70005 | Addition <input checked="" type="checkbox"/> |
| VP/D | William E. Rowe
110 Veterans Blvd.
Metairie, LA 70005 | Addition <input checked="" type="checkbox"/> |
| VP/D | Brian J. Marlowe
6707 Democracy Blvd., Suite 950
Bethesda, MD 20817 | Addition <input checked="" type="checkbox"/> |