


**2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)**

**FILED**  
**Apr 28, 2004 8:00 am**  
**Secretary of State**

04-28-2004 90327 001 \*1,800.00

|   |   |
|---|---|
| <b>DOCUMENT # 018214</b>                          |  |
| 1. Entity Name<br><b>GARDEN OF MEMORIES, INC.</b> |   |

|   |  |
|---|--|
| Principal Place of Business<br><b>4207 E LAKE AVE<br/>TAMPA FL 33610<br/>US</b> | Mailing Address<br><b>ATTN : SALT<br/>PO BOX 11250<br/>NEW ORLEANS LA 70181-1250</b> |
|---|--|



MOORE CR2E034 (11/03)

|                                |                     |
|--------------------------------|---------------------|
| 2. Principal Place of Business | 3. Mailing Address  |
| Suite, Apt. #, etc.            | Suite, Apt. #, etc. |

|              |              |                                    |  |
|--------------|--------------|------------------------------------|--|
| City & State | City & State | 4. FEI Number<br><b>59-0259432</b> | Applied For<br><input type="checkbox"/> Not Applicable |
|--------------|--------------|------------------------------------|--|

|     |         |     |         |   |
|-----|---------|-----|---------|---|
| Zip | Country | Zip | Country | 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b> |
|-----|---------|-----|---------|---|

|  |  |
|--|--|
| <b>6. Name and Address of Current Registered Agent</b>                         | <b>7. Name and Address of New Registered Agent</b> |
| <b>CT CORPORATION SYSTEM<br/>1200 PINE ISLAND ROAD<br/>PLANTATION FL 33324</b> | Name   |
|  | Street Address (P.O. Box Number is Not Acceptable) |
|  | City   |
|  | State <b>FL</b> 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 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                     |   |
|--|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>PAS<br/>PANTER, MARK A<br/>5101 N. NEBRASKA AVE.<br/>TAMPA FL 33603</b> <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>TS<br/>FRIOU, THOMAS H<br/>1201 S ORLANDO AVE #365<br/>WINTER PRK FL 32789</b> <input type="checkbox"/> Delete     |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>VAS<br/>HEFFRON, BRENT F<br/>1201 S ORLANDO AVE #365<br/>WINTER PRK FL 32789</b> <input type="checkbox"/> Delete   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>D<br/>ROWE, WILLIAM E<br/>110 VETERANS MEMORIAL BLVD<br/>METAIRIE LA 70005</b> <input type="checkbox"/> Delete     |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>AS<br/>TRAHAN, LORALICE A<br/>110 VETERANS MEMORIAL BLVD<br/>METAIRIE LA 70005</b> <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>ASD<br/>BUDDE, KENNETH C<br/>110 VETERANS BLVD<br/>METAIRIE LA</b> <input type="checkbox"/> Delete                 |

| 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 |   |
|---|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>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:** *Loralice A. Trahan* **Loralice A. Trahan**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **Asst. Sec./Asst. Treas.**  
 Date: **4/19/04** Daytime Phone #: **(504) 849-2160**

Attachment

GARDEN OF MEMORIES, INC.

106416065  
#018214

### Officer Names and Addresses

|                    |                          |  |
|--------------------|--------------------------|--|
| Mark A. Panter     | President/Asst Secretary | 5101 N. Nebraska Ave., Tampa, FL 33603                 |
| Brent F. Heffron   | Exec Vice Pres/Asst Sec  | 1201 S. Orlando Ave., Suite 365, Winter Park, FL 32789 |
| William E. Rowe    | Vice President           | 110 Veterans Blvd., Metairie, LA 70005                 |
| Michael G. Hymel   | Vice President           | 110 Veterans Blvd., Metairie, LA 70005                 |
| Thomas H. Friou    | Secretary/Treasurer      | 1201 S. Orlando Ave., Suite 365, Winter Park, FL 32789 |
| Kenneth C. Budde   | Asst Sec/Asst Treas      | 110 Veterans Blvd., Metairie, LA 70005                 |
| Loralice A. Trahan | Asst Sec/Asst Treas      | 110 Veterans Blvd., Metairie, LA 70005                 |

### Director Names and Addresses

|                  |          |  |
|------------------|----------|--|
| William E. Rowe  | Director | 110 Veterans Blvd., Metairie, LA 70005                 |
| Kenneth C. Budde | Director | 110 Veterans Blvd., Metairie, LA 70005                 |
| Brent F. Heffron | Director | 1201 S. Orlando Ave., Suite 365, Winter Park, FL 32789 |

### Registered Agent

CT Corporation System  
1200 South Pine Island Rd.  
Plantation, Florida 33324