

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 018179

Entity Name: OAKLAWN CEMETERY ASSOCIATION**Current Principal Place of Business:**1929 ALLEN PARKWAY
HOUSTON, TX 77019**Current Mailing Address:**1929 ALLEN PARKWAY
HOUSTON, TX 77019 US**FEI Number:** 59-0380400**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US*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.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title ASD
Name GARRETT, SUSAN
Address 1929 ALLEN PARKWAY
City-State-Zip: HOUSTON TX 77019

Title T
Name TRIESCH, MICHAEL
Address 1929 ALLEN PARKWAY
City-State-Zip: HOUSTON TX 77019

Title PRD
Name LONGINO, N. LEE
Address 26133 US 19 NORTH STE 308
City-State-Zip: CLEARWATER FL 33763

Title VP
Name ARGUE, PAM
Address 4815 C CLYDE MORRIS BLVD
City-State-Zip: PORT ORANGE FL 32129

Title VP
Name GRUENDL, KEITH
Address 26133 US 19 NORTH STE 308
City-State-Zip: CLEARWATER FL 33763

Title VP
Name BRIGGS, CURTIS G
Address 1929 ALLEN PARKWAY
City-State-Zip: HOUSTON TX 77019

Title VP
Name GUARA, MANUEL
Address 8200 BIRD RD FL 2
City-State-Zip: MIAMI FL 33155

Title SD
Name KEY, JANET
Address 1929 ALLEN PARKWAY
City-State-Zip: HOUSTON TX 77019

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL G TRIESCH**TREASURER****03/20/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date