

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000094561

Entity Name: COMPASS POINTE CREMATION SERVICES, LLC

Current Principal Place of Business:

743 S ORANGE BLOSSOM TRAIL
ORLANDO, FL 32805

Current Mailing Address:

P.O. BOX 770188
WINTER GARDEN, FL 34777 US

FEI Number: 45-2968018

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JOHNSTON, CHRISTOPHER E
743 S ORANGE BLOSSOM TRAIL
ORLANDO, FL 32805 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

Authorized Person(s) Detail :

Title MANAGER
Name JOHNSTON, CHRISTOPHER
Address P.O. BOX 770188
City-State-Zip: WINTER GARDEN FL 34777

Title MANAGER
Name HEATHER, NORTON
Address P.O. BOX 770188
City-State-Zip: WINTER GARDEN FL 34777

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHRISTOPHER JOHNSTON

MANAGER

01/16/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date