

**2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M04000005025

**Entity Name:** NORTHSTAR FUNERAL SERVICES OF FLORIDA, LLC

**Current Principal Place of Business:**

1900 ST. JAMES PLACE  
SUITE 300  
HOUSTON, TX 77056

**FILED**  
**Apr 22, 2020**  
**Secretary of State**  
**2478895485CC**

**Current Mailing Address:**

1900 ST. JAMES PLACE  
SUITE 300  
HOUSTON, TX 77056 US

**FEI Number: 61-1479229**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
PLANTATION, FL 33324 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	MEMBER	Title	PRESIDENT / COO
Name	NORTHSTAR FUNERAL GROUP, LLC	Name	SULLIVAN, BRIAN
Address	1900 ST. JAMES PLACE SUITE 300	Address	1900 ST. JAMES PLACE SUITE 300
City-State-Zip:	HOUSTON TX 77056	City-State-Zip:	HOUSTON TX 77056
Title	VP	Title	VP OPS
Name	RENFRO, JOHN	Name	JENKINS, DAVID
Address	1900 ST. JAMES PLACE SUITE 300	Address	1900 ST. JAMES PLACE SUITE 300
City-State-Zip:	HOUSTON TX 77056	City-State-Zip:	HOUSTON TX 77056
Title	SVP	Title	EXECUTIVE VICE PRESIDENT
Name	REICHERT, THOMAS	Name	BIRCH, TIMOTHY
Address	1900 ST. JAMES PLACE SUITE 300	Address	1900 ST. JAMES PLACE SUITE 300
City-State-Zip:	HOUSTON TX 77056	City-State-Zip:	HOUSTON TX 77056

*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: NORTHSTAR FUNERAL GROUP, LLC**

**MEMBER**

**04/22/2020**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date