## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Feb 05 1998 8:00am Secretary of State

1998	DIVISION OF	CORPORATIONS	Secretary	of State
DOCUMENT # F9300 1. Corporation Name GP JAMAICA BAY CORP.	0005767 (9)			
		· · · · · · · · · · · · · · · · · · ·		
Principal Place of Business	Mailing Address			
SUITE 300 280 DAINES STREET	SUITE 300 280 DAINES STREET			
BIRMINGHAM MI 48009	BIRMINGHAM MI 48009		DO NOT WRITE IN	THIS SPACE
			<ol> <li>Date Incorporated or Qualified 12/20/1993</li> </ol>	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		38-3152197	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional Fee Required
City & State	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid	
24 25	29	30	Personal Property Tax due June 30	
9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Regis	tered Agent
RINES, MILTON		81 Name		
15235 S TAMIAMI TRAIL		82 Street Add	Address (P.O. Box Number is Not Acceptable)	
FT MYERS FL 33908		83		
		84 City		FI 85 Zip Code
11. Pursuant to the provisions of Sections 607.05 office or registered agent, or both, in the Stat agent. I am lamiliar with, and accept the obli	502 and 607,1508, Florida Statut te of Fiorida, Such change was a	es, the above-named corpora authorized by the corpora	poration submits this statement for the purption's board of directors. I hereby accept t	
	gations of, decitor our good, Fit	orgua diatates.		
SIGNATURE Signature, typed or printed name of registered a	igent and title ¥ applicable. (NOT	E, Registered Agent signature regul		DATE
	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	
TIOTOTT DALIL	DELETE	1.1 TITLE 1.2 NAME		Change Addition
GOA DAINIES STREET SHITE	200 DAMES STREET SHITE 200			
STREET ADDRESS   ZOU DAINES STREET, SOITE CITY-SI-ZIP   BIRMINGHAM MI 48009		1.3 STREET ADDRESS 1.4 CITY - ST - ZIP		
TITLE SV	☐ DELETE	2.1 TITLE		Change Addition
NAME ADLER, STEVEN P.	_	2.2 NAME		
STREET ADORESS 280 DAINES STREET, SUITE	E 300	2.3 STREET ADDRESS		
CITY-ST-ZIP BIRMINGHAM MI		2. 4 CITY-ST-ZIP		
TITLE VD	☐ DELETE	3.1 TITLE		XXXChange Addition
NAME HERMELIN, DAVID B	CUITE AGGG	3.2 NAME H	ermelin, Brian M.	
STREET ADDRESS 20500 CIVIC CENTER DRIVE		3.3 STREET ADDRESS		<b>\</b>
CITY-SI-ZIP SOUTHFIELD MI 48037-0188		3.4. CITY-ST-ZIP		Change Addition
NAME WEISS, ARTHUR	L DELETE	4.1 TITLE 4.2 NAME		Change Addition
STREET ADDRESS   280 DAINES ST SUITE 300		4.3 STREET ADDRESS		
CITY-ST-ZIP BIRMINGHAM MI 48009		4.4 CITY - ST-ZIP		
TITLE VT	☐ DELETE	5.1 TITLE		Change Addition
NAME KOSTER, GLORIA A.	• • • •	5.2 NAME		
STREET ADDRESS 280 DAINES STREET, SUITE	300	5.3 STREET ADDRESS		
CITY-ST-ZIP BIRMINGHAM MI 48009		5.4 CITY-ST-ZIP		The state of the s
TITLE	☐ DELETE	6.1 TITLE		Change Addition
NAME CYPETT ADDRESS		6.2 NAME 6.3 STREET ADDRESS		
STREET ADDRESS CITY-ST-ZIP		6.4 CITY-ST-ZIP		
14. I hereby certify that the information supplied to	with this filling/does not qualify fo		Section 119.07(3)(i), Florida Statutes, I fur	her certify that the information

guirual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am at ver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in mentilinghan address.

SIGNATURE:

1/13/98