

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000090585 (7)**

1. Corporation Name
PLANTATION LOAN COMPANY, INC.



Principal Place of Business: **3300 PHILLIPS HWY. JACKSONVILLE FL 32207**
Mailing Address: **3300 PHILLIPS HWY. JACKSONVILLE FL 32207**

3. Date Incorporated or Qualified: **11/28/1995**
3a. Date of Last Report

2. Principal Place of Business
21. Suite, Apt. #, etc.
22. City & State
23. Zip Country
24. 25. 26. Mailing Address
26. **P.O. Box 5369**
27. Suite, Apt. #, etc.
28. City & State
28. **Jacksonville, FL**
29. Zip Country
29. **32247** 30. **Duval**

4. FEI Number: **59-3353711**
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
~~BURLEIGH, TIMOTHY A.~~
~~ONE INDEPENDENT DR.~~
~~SUITE 3000~~
~~JACKSONVILLE FL 32202~~

10. Name and Address of New Registered Agent
81. Name: **Thomas R. McGehee**
82. Street Address (P.O. Box Number is Not Acceptable): **3300 Philips Hwy**
83.
84. City: **Jacksonville** FL 85. Zip Code: **32207**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Thomas R. McGehee* **Thomas R. McGehee, President** 4/25/96
DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	Thomas R. McGehee	
STREET ADDRESS	3300 Philips Hwy	
CITY - ST - ZIP	Jacksonville	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2. NAME	Thomas R. McGehee	
3. STREET ADDRESS	3300 Philips Hwy	
4. CITY - ST - ZIP	Jacksonville, FL. 32207	
5. TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6. NAME	Sutton McGehee	
7. STREET ADDRESS	3300 Philips Hwy	
8. CITY - ST - ZIP	Jacksonville, FL. 32207	
9. TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
10. NAME	Thomas R. McGehee, Jr.	
11. STREET ADDRESS	3300 Philips Hwy	
12. CITY - ST - ZIP	Jacksonville, FL. 32207	
13. TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
14. NAME	David S. McGehee	
15. STREET ADDRESS	3300 Philips Hwy	
16. CITY - ST - ZIP	Jacksonville, FL. 32207	
17. TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
18. NAME	Frank S. McGehee	
19. STREET ADDRESS	3300 Philips Hwy	
20. CITY - ST - ZIP	Jacksonville, FL. 32207	
21. TITLE	T AS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22. NAME	Jonathan V. Rogers	
23. STREET ADDRESS	3300 Philips Hwy	
24. CITY - ST - ZIP	Jacksonville, FL. 32207	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Sutton McGehee* **Sutton McGehee** 4/25/96 (904) 348-3300
DATE

CR2E034 (12/95)