

A95000001502

LANE, TROHN, CLARKE, BERTRAND, VREELAND & JACOBSEN, P.A.

JOHN A. ATTAWAY, JR.
ROBERT J. BERTRAND
CLARENCE A. BOSWELL
ROBERT M. BRUSH
HANK B. CAMPBELL
CHRISTINE M. CASINGAL
THOMAS L. CLARKE, JR.
DABNEY L. CONNER
JONATHAN M. CROWDER
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JUDITH J. FLANDERS
MITCHELL D. FRANKS
LYNN H. GROSECLOSE
CLAUDE M. HARDEN, III
NANCY C. HARRISON
DONALD G. JACOBSEN
ANDREW A. McCUMBER
NIA L. MCKOWN

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ONE LAKE MORTON DRIVE
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LAKELAND, FLORIDA 33802-0003
TELEPHONE (941) 284-2200
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1401 MANATEE WEST, SUITE 920
POST OFFICE BOX 551
BRADENTON, FLORIDA 34208-0551
TELEPHONE (941) 747-1871
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MARK N. MILLER
PATRICK J. MURPHY
JOHN V. QUINLAN
GARY S. RABIN
STEVEN L. SELPH
EDWIN A. SCALES, III
GILBERT A. SMITH, JR.
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JONATHAN STIDHAM
WOFFORD H. STIDHAM
ROBERT G. STOKES
JANET M. STUART
JONATHAN B. TROHN
ROBERT L. TROHN
JOHN K. VREELAND
DONALD H. WILSON, JR.

IN REPLY REFER TO:

Lakeland

September 26, 1995

A. H. LANE (RETIRED)

Division of Corporations
Secretary of State
Post Office Box 6327
Tallahassee, FL 32314

900001599009
-10/02/95--01049--003
***1837.50 ***1837.50

Re: The Morgan Family Limited Partnership
Our File: M315-21047

Gentlemen:

Enclosed are a Certificate of Limited Partnership and Affidavit of Capital Contributions for The Morgan Family Limited Partnership. Also enclosed is a check in the amount of \$1,837.50, representing the filing fee of \$1,750.00, \$35.00 for the designation of registered agent and \$52.50 for a certified copy.

Please file the enclosed and return the certified copy to me at the above address. A self-addressed, stamped envelope is enclosed for your convenience.

Very truly yours,

John K. Vreeland

JKV/as
Encl. as noted
xc: James and Glenda Morgan (w/encl.)

FILED
1995 OCT -9 AM 10:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

~~9500001599009~~
10/9/95



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

October 3, 1995

JOHN K. VREELAND, ESQUIRE
LANE, TROHN, CLARKE, BERTRAND, VREELAND
POST OFFICE BOX 3
LAKELAND, FL 33802-0003

SUBJECT: THE MORGAN FAMILY LIMITED PARTNERSHIP
Ref. Number: W95000019677

We have received your document for THE MORGAN FAMILY LIMITED PARTNERSHIP and your check(s) totaling \$1837.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6920.

Ava Watson
Corporate Specialist

Letter Number: 695A00044897

LAW OFFICES OF
LANE, TROHN, CLARKE, BERTRAND, VREELAND & JACOBSEN, P.A.

JOHN A. ATTAWAY, JR.
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JANET M. STUART
JONATHAN B. TROHN
ROBERT L. TROHN
JOHN K. VREELAND
DONALD M. WILSON, JR.

IN REPLY REFER TO:
Lakeland

October 5, 1995

A. H. LANE (RETIRED)

Florida Department of State
Secretary of State
Attn: Ava Watson
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: The Morgan Family Limited Partnership
Ref No: W9500001967
Our File: M315-21047

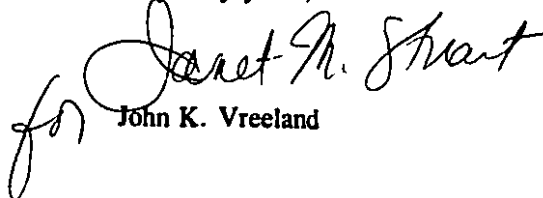
Dear Ms. Watson:

Please find enclosed the following signed documents, together with a copy of your letter, as requested:

1. Certificate Designating Place of Business or Domicile For The Service of Process Within This State; Naming Agent Upon Whom Process May Be Served;
2. Certificate of Limited Partnership of The Morgan Family Limited Partnership and
3. Affidavit of Capital Contributions for The Morgan Family Limited Partnership.

Thank you for your courteous attention to this matter.

Very truly yours,


for John K. Vreeland

JKV/as
Encl. as noted

A95000001502

**CERTIFICATE OF LIMITED PARTNERSHIP OF
THE MORGAN FAMILY LIMITED PARTNERSHIP**

The undersigned General Partners, desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Act as set forth in Florida Statutes §620.108, hereby state the following:

1. The name of the Partnership is **THE MORGAN FAMILY LIMITED PARTNERSHIP**.

2. The address of the office of the Partnership is 1109 Bryn Mawr, Lake Wales, Florida 33853.

3. The name and address of the agent for service of process on the Partnership are:

John K. Vreeland
One Lake Morton Drive
Lakeland, Florida 33801

4. The names and business addresses of the General Partners are as follows:

James D. Morgan 1109 Bryn Mawr
Lake Wales, Florida 33853

Glenda G. Morgan 1109 Bryn Mawr
Lake Wales, Florida 33853

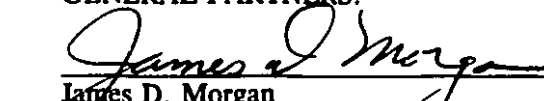
5. The mailing address of the Partnership is 1109 Bryn Mawr, Lake Wales, Florida 33853.

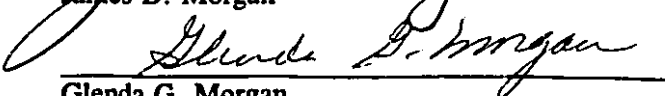
6. The latest date upon which the Partnership shall dissolve is December 31, 2045.

The execution of this Certificate by the undersigned General Partners constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed by all of the General Partners of **THE MORGAN FAMILY LIMITED PARTNERSHIP** this 15th day of September, 1995.

GENERAL PARTNERS:


James D. Morgan


Glenda G. Morgan

FILED
1995 OCT -9 AM 10:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR
THE MORGAN FAMILY LIMITED PARTNERSHIP**

BEFORE ME, the undersigned authority, personally appeared JAMES D. MORGAN and GLENDA G. MORGAN, who, being first duly sworn, depose and say:

1. That they are all of the General Partners of **THE MORGAN FAMILY LIMITED PARTNERSHIP**, a Florida limited partnership.

2. That the amount of capital contributions to date of the Limited Partners is \$20,000.

3. That the total amount anticipated to be contributed by the Limited Partners is \$2,000,000.

FURTHER AFFIANTS SAYETH NOT.

James D. Morgan
James D. Morgan
Glenda G. Morgan
Glenda G. Morgan

SWORN TO AND SUBSCRIBED before me, this 15th day of September, 1995, by JAMES D. MORGAN and GLENDA G. MORGAN, who are personally known to me.



John K. Vreeland
John K. Vreeland, Notary Public
My commission expires: January 10, 1999
My commission number: CC 422588

FILED
1995 OCT -9 AM 10:07
SEAL OF THE STATE
TALLAHASSEE, FLORIDA

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE; NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In pursuance of Chapter 48.061, Florida Statutes, the following is submitted, in compliance with said Act:

That **THE MORGAN FAMILY LIMITED PARTNERSHIP**, desiring to organize under the laws of the State of Florida, with its principal office, as indicated in the Certificate of Limited Partnership, at the City of Lake Wales, County of Polk, State of Florida, has named **JOHN K. VREELAND**, located at One Lake Morton Drive, City of Lakeland, County of Polk, State of Florida, as its agent to accept service of process within this State.

ACKNOWLEDGMENT:

Having been named to accept service of process for the above-stated limited partnership, at the place designated in this certificate, I hereby accept said designation, and agree to comply with the provision of said Act relative to said capacity.

By:


JOHN K. VREELAND
Registered Agent

FILED
1995 OCT -9 AM 10:07
TALLAHASSEE, FLORIDA

FILE ON OR BEFORE DECEMBER 31, 1995 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

A9500001502

FILED

95 DEC 18 PM 2:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership
THE MORGAN FAMILY LIMITED PARTNERSHIP

1a. DOCUMENT #
A95000001502

96-AR

Mailing Address

**1109 Bryn Mawr
Lake Wales, FL 33853**

Principal Office Address

**1109 Bryn Mawr
Lake Wales, FL 33853**

CM

If above addresses are incorrect in any way, line through the incorrect information and enter correct address in Block 2 and/or 2a

3. Date Formed or Registered to Do Business in
FLORIDA

10/9/95

3a. Date of Last Report

n/a

4. State or Country of Formation

Polk

5a. Capital Contributions as Shown
on Record

\$2,000,000

5b. Amount of Capital Contributions in
FLORIDA to date

\$1,770.00

6. FEI Number

59-3338810

Applied For

Not Applicable

7. CERTIFICATE OF STATUS REQUIRED ☐

8. FEES: 1.) Filing Fee: Computed at a rate of \$7 per \$1,000 on amount entered in 5b or 5a if 5b blank, with a minimum filing fee of \$52.50 and a maximum of \$437.50
2.) Supplemental Fee: \$138.75 (pursuant to section 607.193, F.S.)

THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$138.75) AND NO MORE THAN \$576.25 (\$437.50 + \$138.75)

Note: If the amount entered in 5b is greater than amount entered in 5a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE.

9. Name and Address of Current Registered Agent

**John K. Vreeland
One Lake Morton Drive
Lakeland, FL 33801**

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite Apt #, etc

City

FL

Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, 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 its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s)

James D. Morgan

Glenda G. Morgan

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

1109 Bryn Mawr

1109 Bryn Mawr

11b. City, State & Zip Code

Lake Wales, FL 33853

Lake Wales, FL 33853

11c. Registration/
Document Number

**800001673288
-12/28/95--01077--020
****576.25 ****576.25**

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. 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 release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

James D. Morgan

DATE

Typed or Printed Name of General Partner Signing Form

Telephone Number **941-638-3355**

CR2E003 (6/95)

LAW OFFICES OF
LANE, TROHN, CLARKE, BERTRAND, VREELAND & JACOBSEN, P.A.

JOHN A. ATTHORN, JR.
ROBERT J. BERTRAND
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PATRICK J. SHIMMY
JOHN V. CHANLAN
GARY S. RABIN
STEVEN L. SELPH
BRYAN A. SCALTS, III
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WOPFORD H. STEPHAN
ROBERT S. STOKES
JAMES M. STUART
JONATHAN S. TROHN
ROBERT L. TROHN
JOHN K. VREELAND
DONALD H. WELSON, JR.
A. M. LANE (RETIRED)

IN REPLY REFER TO:
Lakeland

December 14, 1995

Division of Corporations
Attn: Partnership Section
P.O. Box 6327
Tallahassee, Florida 32314

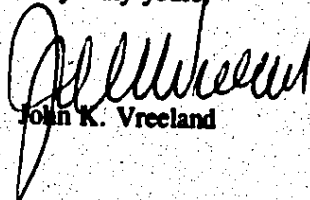
Re: The Morgan Family Limited Partnership
Our File: M315-21047

Dear Sir/Madam:

Please find enclosed signed Limited Partnership Annual Report 1996, together with Check No. 2254 in the sum of \$576.25 for the filing fee in the above-referenced matter.

Your courteous attention to this matter is appreciated.

Very truly yours,


John K. Vreeland

JKV/as
Encl. as noted
xc: James & Glenda Morgan (w/o encl.)