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**F95000000634**

**C T CORPORATION SYSTEM**  
Requestor's Name  
1311 Executive Center Drive, Ste. 200  
Address  
Tallahassee, FL 32301 (904) 656-8290  
City State Zip Phone

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**CORPORATION(S) NAME**

Seasons Management Company

- |  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Profit   | <input type="checkbox"/> Amendment              | <input type="checkbox"/> Merger             |
| <input type="checkbox"/> NonProfit           | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark               |
| <input type="checkbox"/> Foreign             | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Other              |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Resurrection           | <input type="checkbox"/> Change of N.A.     |
| <input type="checkbox"/> Reinstatement       | <input type="checkbox"/> Photo Copies           | <input type="checkbox"/> Fictitious Name    |
| <input type="checkbox"/> Certified Copy      | <input type="checkbox"/> Call When Ready        | <input type="checkbox"/> CUS / G/S          |
| <input type="checkbox"/> Call When Ready     | <input type="checkbox"/> Call If Problem        | <input type="checkbox"/> After 4:30         |
| <input checked="" type="checkbox"/> Walk In  | <input type="checkbox"/> Will Wait              | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out            |   |   |

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# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TRANSACTION BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS  
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACTION BUSINESS IN THE  
STATE OF FLORIDA:

1. Seasons Management Company  
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or  
words or abbreviations of like import in language as will clearly indicate that it is a corporation instead  
of a natural person or partnership if not so contained in the name at present.)
2. Ohio 3. 31-1394779  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 12-29-93 5. Perpetual  
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Upon Qualification  
(Date first transacted business in Florida. See sections 607.1501, 607.1502 and 817.150, F.S.)
7. 400 Broadway  
Cincinnati, Ohio 45202  
(Current mailing address)
8. To manage real estate investment property and to engage in any lawful act or activity for which  
corporations may be formed under Sections 1701.01-1701.98, inclusive, of the Ohio Revised Code.  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of  
Florida)

9. Name and street address of Florida registered agent:

Name: C T CORPORATION SYSTEM

Office Address: c/o C T Corporation System, 1200 South Pine Island Road

Plantation, Florida, 33324  
(Zip Code)

10. Registered agent acceptance:

*Having been named as registered agent and to accept service of process for the above stated  
corporation at the place designated in this application. I hereby accept the appointment as  
registered agent and agree to act in this capacity. I further agree to comply with the provisions of  
all statutes relative to the proper and complete performance of my duties, and I am familiar with  
and accept the obligations of my position as registered agent.*

C T CORPORATION SYSTEM

G. L. Hatfield  
(Registered agent's signature) (Officer)

G. L. Hatfield, Assistant Secretary  
(Type Name and Title of Officer)

11 Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12 Names and addresses of officers and/or directors: See attached list

A. DIRECTORS

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

B. OFFICERS

President: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

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Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Mario San Marco  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Mario San Marco, President  
(Typed or printed name and capacity of person signing application)

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11. A. and B.      Name and Address of Officers and/or Directors.

<u>Name</u>	<u>Office</u>
William F. Ledwin	Director
Donald J. Wuehbling	Director
Mario San Marco	Director/President
James N. Clark	Director/Treasurer
Edward W. Grout	Vice President and Comptroller
Richard K. Taulbee	Vice President
Thomas P. Behan	Second Vice President
William D. Griffin	Second Vice President and Assistant Secretary
James W. Carpenter	Secretary
Timothy D. Speed	Assistant Treasurer and Assistant Secretary
Robert A. Dressman	Assistant Treasurer

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The address for all listed above is 400 Broadway, Cincinnati, Ohio 45202

UNITED STATES OF AMERICA,  
STATE OF OHIO,  
OFFICE OF THE SECRETARY OF STATE.



*I, Bob Taft, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations and miscellaneous filings; that said records show SEASONS MANAGEMENT COMPANY, an Ohio Corporation, Charter No. 860380, principal location in Cincinnati, County of Hamilton, incorporated on December 29, 1993, is currently in GOOD STANDING upon the records of this office.*

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WITNESS my hand and official  
seal at Columbus, Ohio this  
6th day of February, A.D. 1995

*Bob Taft*

Bob Taft  
Secretary of State