

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 02, 2004 8:00 am
Secretary of State

06-02-2004 90002 026 ***150.00

DOCUMENT # F98000001286

1. Entity Name
ORIX GARRISON, INC.



Principal Place of Business
**100 NORTH RIVERSIDE PLAZA, STE 1400
CHICAGO, IL 60606**

Mailing Address
**100 NORTH RIVERSIDE PLAZA, STE 1400
CHICAGO, IL 60606**

54056356



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

05182004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

36-4214259

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LEXIS DOCUMENT SERVICES, INC.
1201 HAYS STREET
TALLAHASSEE, FL 32301**

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Delete
NAME PURINTON, JAMES H
STREET ADDRESS 100 NORTH RIVERSIDE PLAZA, STE 1400
CITY-ST-ZIP CHICAGO, IL 60606

TITLE PD ☒ Change ☐ Addition
NAME BROWN, DAVID
STREET ADDRESS 100 NORTH RIVERSIDE PLAZA, STE 1400
CITY-ST-ZIP CHICAGO, IL 60606

TITLE EVST ☐ Delete
NAME PLACK, JEFFREY C
STREET ADDRESS 100 NORTH RIVERSIDE PLAZA, STE 1400
CITY-ST-ZIP CHICAGO, IL 60606

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VCD ☐ Delete
NAME NISHIO, HIROSHI
STREET ADDRESS 100 N RIVERSIDE PLAZA STE 1400
CITY-ST-ZIP CHICAGO, IL 60606

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SEVD ☒ Delete
NAME MCCULLOUGH, MICHAEL
STREET ADDRESS 100 NORTH RIVERSIDE PLAZA, STE 1400
CITY-ST-ZIP CHICAGO, IL 60606

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VAST ☐ Delete
NAME HOVANEC, DONNA
STREET ADDRESS 100 NORTH RIVERSIDE PLAZA, STE 1400
CITY-ST-ZIP CHICAGO, IL 60606

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jeffrey C. Plack JEFFREY C. PLACK

5/17/04

312/669-6400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #