FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

APPROVED AND FILED

95 APR 24 PM 1:27

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # **P94000044787 (7)**

1.

PLANTATION PROPERTIES CORPORATION

1200 GULF LIFE DRIVE
SUITE 902
JACKSONVILLE FL 32207

1200 GULF LIFE DRIVE
SUITE 902
JACKSONVILLE FL 32207

3. 3a.

06/13/1994

2. Principal Place of Business	2a. Mailing Address
21 1200 River Place Blvd.	26 1200 RIVER PLACE BLVD.
22 902	27 902
23 JACKSONVILLE, FL	28 JACKSONVILLE, FL
24 32207 25 USA	29 32207 30 USA

4. FEI Number: 59-3266915 — Applied For / Not Applicable

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. Florida Statutes: Yes [X] No

9. Name and Address of Current Registered Agent

FOLEY & LARDNER CORP.
ATTN: LUTHER F. SADLER, JR.
200 LAURA STREET, THE GREENLEAF BLDG.
JACKSONVILLE FL 32202-3527

10. Name and Address of New Registered Agent

81 Name

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

83

84 City FL 85 Zip Code

11. [illegible]

SIGNATURE

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
P James H. Dahl 1200 Riverplace Blvd Suite 902 Jacksonville FL 32207	[ ] Delete [X] Addition P James H. Dahl 1200 Riverplace Blvd Suite 902 Jacksonville, FL 32207
VP & T Arthur L. Cahoon 1200 Riverplace Blvd Suite 902 Jacksonville FL 32207	[ ] Delete [X] Addition VP/T Arthur L. Cahoon 1200 Riverplace Blvd Suite 902 Jacksonville FL 32207
S William L. Dahl 1200 Riverplace Blvd Suite 902 Jacksonville FL 32207	[ ] Delete [X] Addition S William L. Dahl 1200 Riverplace Blvd Suite 902 Jacksonville FL 32207

14. [illegible]

SIGNATURE: *W. L. Dahl* — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/95 904 393-9020

0016116 CP

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CORPORATION ANNUAL REPORT 1995

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

DOCUMENT # P94000045159 (8)

1. Corporation Name

GIN PROPERTIES, INC.

100001469971
-05/01/95--01087--004
****200.00 ****200.00

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
2033 MAIN ST. SUITE 600 SARASOTA FL 34237	2033 MAIN ST SUITE 600 SARASOTA FL 34237

3. Date Incorporated or Qualified: 06/16/1994
3a. Date of Last Report:

2. Principal Place of Business: 21
Suite, Apt #, etc. 22
City & State 23
Zip 24 Country 25

2a. Mailing Address: 26
Suite, Apt #, etc. 27
City & State 28
Zip 29 Country 30

4. FEI Number: 65-0497904 ☐ Applied For ☐ Not Applicable

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

MYERS, TROY H JR
2033 MAIN STREET
SUITE 600
SARASOTA FL 34237

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 ______ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE ______

12. OFFICERS AND DIRECTORS

TITLE	DPS
NAME	MYERS, TROY H JR.
STREET ADDRESS	2033 MAIN ST., SUITE 600
CITY ST ZIP	SARASOTA FL 34237
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	DP	☒ Change ☐ Addition
12 NAME	George Kane	
13 STREET ADDRESS	4059 Shell Road	
14 CITY ST ZIP	Sarasota, FL 34242	
21 TITLE	DS	☒ Change ☐ Addition
22 NAME	Amy Kane	
23 STREET ADDRESS	4059 Shell Road	
24 CITY ST ZIP	Sarasota, FL 34242	
31 TITLE		☐ Change ☐ Addition
32 NAME		
33 STREET ADDRESS		
34 CITY ST ZIP		
41 TITLE		☐ Change ☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY ST ZIP		
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY ST ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY ST ZIP		

4/27/95 usf

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)(i), 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: [signature] George Kane — 4/ 25 /95 — 813/953-8110

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0143107 CP

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CORPORATION ANNUAL REPORT

1995

APPROVED AND FILED

95 APR [illegible] PM 4: 15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000045811 (4)

MATSUKO INTERNATIONAL MORTGAGE CO.

Principal Place of Business: 4907 28TH AVE E, PALMETTO FL 34221

Mailing Address: 4907 28TH AVE E, PALMETTO FL 34221

3. Date Incorporated or Qualified: 06/09/1994

4. FEI Number: ✓ Applied For / Not Applicable

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 the liability for intangible tax under s. 199, Florida Statutes. Yes / No

9. Name and Address of Current Registered Agent

MCCOY, JOHN F
4907 28TH AVE E
PALMETTO FL 34221

10. Name and Address of New Registered Agent

Name:
Street Address (P.O. Box Number is Not Acceptable):
City: FL Zip Code:

11. [illegible]

SIGNATURE:

12. OFFICERS AND DIRECTORS

Title	Name	Street Address	City-St-Zip
D	SHEPARD, DORIS	4907 28TH AVE E	PALMETTO FL 34221
D	SHEPARD, CARL L	4907 28TH AVE E	PALMETTO FL 34221
D	MCCOY, JOHN F	4907 28TH AVE E	PALMETTO FL 34221

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12/4/25

14. [illegible]

SIGNATURE: John F McCoy, Secy/Tres. 04-17-95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0454764 FP