

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

CHRYSLER CO.

$\frac{d}{dt} \left(\frac{\partial L}{\partial \dot{x}} \right) = \frac{\partial L}{\partial x}$

1995



DOCUMENT # **P94000044787 (7)**

PLANTATION PROPERTIES CORPORATION

APPROVED
AND
FILED

05 APR 24 PM 1:27

ALLAHSSEE, FLORIDA

1200 GULF LIFE DRIVE
SUITE 902
JACKSONVILLE FL 32207

1200 GULF LIFE DRIVE
SUITE 902
JACKSONVILLE FL 32207

1. The first step is to identify the problem or question that needs to be answered. This involves understanding the context and the specific requirements of the task.

06/13/1994

59-3266915

Page 1 of 1

**\$8.75 Additional
Fee Required**

\$5.00 May Be
Added to Fees

☐ Yes: ☒ No:

211 1200 River Place Blvd.

26. 1200 RIVER PLACE BLVD.

23 902

27 902

JACKSONVILLE, FL

2B JACKSONVILLE, FL

24 32207

25 USA

29 32207

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

01	First Name
02	Street Address (P.O. Box Number or Post Office Address)

FL

85 20000000

11. Pursuant to the provisions of law, beginning on 1/1/2000, the local entities have been required to submit the statement for the payment of changed its registered office to a competent authority in the place of the local entity. Europe A.S. has submitted the corresponding form to the competent authority on 4 May 2000 and the change notified as requested, dated 1 June.

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12.		CATHERINE ANN DE LOACH
12.	P	
NAME		James H. Dahl
HOME ADDRESS		1200 Riverplace Blvd Suite 902 Jacksonville FL 32207
WORK ADDRESS		VP & T
NAME		Arthur L. Cahoon
HOME ADDRESS		1200 Riverplace Blvd Suite 902 Jacksonville FL 32207
WORK ADDRESS	S	
NAME		William L. Dahl
HOME ADDRESS		1200 Riverplace Blvd Suite 902 Jacksonville FL 32207

13.	ADDITIONAL CHANGES TO SUBMITTING AGENCY
	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
	S
	William L. Dahl
	1200 Riverplace Blvd Suite 902
	Jacksonville FL 32207

SIGNATURE:

SIGNATURE AND TITLE OF PERSONS TO WHOM THIS NOTICE IS BEING GIVEN:

4/15/95 904 333-9000

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra H. Moffatt
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000045159 (8)

1. Corporation Name

GIN PROPERTIES, INC.

Principal Place of Business

2033 MAIN ST.
SUITE 600
SARASOTA FL 34237

Mailing Address

2033 MAIN ST
SUITE 600
SARASOTA FL 34237

05/16/1994

STATE
FLORIDA

100001469971

-05/01/95--01087--004

****200.00 ****200.00

DO NOT WRITE IN THIS SPACE

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

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

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 5-199.032,
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 filer of application

(Filer) Registered Agent Signature (required when constituting)

12. OFFICERS AND DIRECTORS

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

☒ Change ☐ Addition

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY ST ZIP
DP
George Kane
4059 Shell Road
Sarasota, FL 34242

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY ST ZIP
DS
Amy Kane
4059 Shell Road
Sarasota, FL 34242

☒ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY ST ZIP

☐ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY ST ZIP

☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY ST ZIP

☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY ST ZIP

☐ Change ☐ Addition

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 119.02(1)(b), 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 owner 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

George Kane

4/13/95

813/953-8110

Daytime Phone

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

APPROVED
AND
FILED

INCORPORATION
ANNUAL REPORT

1995



FLORIDA DEPARTMENT OF STATE
Division of Corporations
2000 Bank of America Building
Tallahassee, Florida 32399-0001
Phone: (904) 498-0001
Fax: (904) 498-0002

06/09/95 PM 4:16

DOCUMENT # P94000045811 (4)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MATSUKO INTERNATIONAL MORTGAGE CO.

4907 28TH AVE E
PALMETTO FL 34221

4907 28TH AVE E
PALMETTO FL 34221

3. Date of Report (Required)	3a. Date of Last Report
06/09/1994	
4. Filing Status	☒ Applied For ☐ Not Applicable
5. Certificate of Status (Required)	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
7. This corporation has submitted for inspection the records required by Florida Statutes.	☐ Yes ☒ No

2. Name of Corporation	2a. Mailing Address
21. Name of Corporation	26. Mailing Address
22. Name of Corporation	27. Mailing Address
23. Name of Corporation	28. Mailing Address
24. Name of Corporation	29. Mailing Address
25. Name of Corporation	30. Mailing Address

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

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

11. Pursuant to the provisions of Sections 607.01 and 607.02, Florida Statutes, this office hereby certifies that this statement for the purpose of a corporation's registered office or registered agent, or both, in the State of Florida, has been authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am hereby accepting the appointment as registered agent in the State of Florida.

SIGNATURE

12. OFFICER AND DIRECTOR	13. ADDITIONAL CHANGE TO OFFICERS AND DIRECTORS
NAME D SHEPARD, DORIS 4907 28TH AVE E PALMETTO FL 34221	☐ Change ☐ Addition
NAME D SHEPARD, CARL L 4907 28TH AVE E PALMETTO FL 34221	☐ Change ☐ Addition
NAME D MCCOY, JOHN F 4907 28TH AVE E PALMETTO FL 34221	☐ Change ☐ Addition
NAME D MCCOY, JOHN F 4907 28TH AVE E PALMETTO FL 34221	☐ Change ☐ Addition
NAME D MCCOY, JOHN F 4907 28TH AVE E PALMETTO FL 34221	☐ Change ☐ Addition
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NAME D MCCOY, JOHN F 4907 28TH AVE E PALMETTO FL 34221	☐ Change ☐ Addition
NAME D MCCOY, JOHN F 4907 28TH AVE E PALMETTO FL 34221	☐ Change ☐ Addition
NAME D MCCOY, JOHN F 4907 28TH AVE E PALMETTO FL 34221	☐ Change ☐ Addition

14. I hereby certify that this information is supported with the filing of a duly prepared and filed report, for the purpose of a corporation's registered office or registered agent, or both, in the State of Florida, has been authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am hereby accepting the appointment as registered agent in the State of Florida.

SIGNATURE:

[Signature] Secy. Gen. 04-17-95