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Mar 31 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 180342 (8)

1. Corporation Name

BELK-HUDSON CO. OF ST. AUGUSTINE, FLA., INC.

Principal Place of Business

PONCE DE LEON MALL
2121 US 1 SOUTH
ST AUGUSTINE FL 32086

Mailing Address

PONCE DE LEON MALL
2121 US 1 SOUTH
ST AUGUSTINE FL 32086-6078



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

08/30/1954

3a. Date of Last Report

02/16/1996

4. FEI Number

59-0724534

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

BERGREN, BYRON L
1312 NORTH MAIN STREET
GAINESVILLE FL 32601

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 of person authorized to change registered agent and file if applicable)

(NOTE: Registered Agent Signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME HUDSON, E.O. J R.
STREET ADDRESS 2390 CHESTNUT NE
CITY, ST, ZIP ORANGEBURG SC 29116

TITLE PDST ☒ DELETE

NAME BELK, THOMAS M.
STREET ADDRESS 2801 W. TYVOLA ROAD
CITY, ST, ZIP CHARLOTTE NC

TITLE AS ☐ DELETE

NAME MOORE, LUTHER T.
STREET ADDRESS 2801 W. TYVOLA ROAD
CITY, ST, ZIP CHARLOTTE NC

TITLE EVST ☐ DELETE

NAME BERGREN, BYRON
STREET ADDRESS 1312 NORTH MAIN STREET
CITY, ST, ZIP GAINESVILLE FL

TITLE CD ☐ DELETE

NAME BELK, JOHN M.
STREET ADDRESS 2801 W. TYVOLA ROAD
CITY, ST, ZIP CHARLOTTE NC

TITLE D ☐ DELETE

NAME BELK, HENDERSON
STREET ADDRESS 2801 TYVOLA ROAD
CITY, ST, ZIP CHARLOTTE NC

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VC/D ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 2390 Chestnut NE
1.4 CITY-ST-ZIP Orangeburg SC 29115 ☐ Change ☒ Addition

2.1 TITLE P/D ☐ Change ☒ Addition

2.2 NAME BELK, THOMAS M. JR.
2.3 STREET ADDRESS 2801 W. TYVOLA ROAD
2.4 CITY-ST-ZIP CHARLOTTE, NC 28217-4500

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP 28217-4500

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP 32601

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP 28217-4500

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP 28217-4500

14. I do 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 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: Luther T. Moore 3/24/97 704-357-1000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone

CR2E034 (9/96)