

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 808124

(2)

1. Corporation Name

SEIBELS, BRUCE & COMPANY



Principal Place of Business

1501 LADY ST
P.O. BOX 1
COLUMBIA SOUTH CAROLINA 29202

Mailing Address

1501 LADY ST
P.O. BOX 1
COLUMBIA SOUTH CAROLINA 29202

3. Date incorporated or Qualified

01/06/1950

3a. Date of Last Report

04/19/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

57-0242440

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

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME D
WILLIAM, SHEALY W
STREET ADDRESS 1501 LADY ST.
CITY- ST- ZIP COLUMBIA, SC 00000

1.1 TITLE D/VP

☒ Change ☐ Addition

TITLE ☐ DELETE

NAME S
BROOKS, PRISCILLA C
STREET ADDRESS 1501 LADY ST
CITY- ST- ZIP COLUMBIA SC

2.1 TITLE

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME VPAT
FIELDS, TERRY E.
STREET ADDRESS GARDNER, MARY, M
CITY- ST- ZIP COLUMBIA, SC 00000

3.1 TITLE

☒ Change ☐ Addition

TITLE ☐ DELETE

NAME DV
KLOPP, F. M
STREET ADDRESS 1501 LADY ST
CITY- ST- ZIP COLUMBIA, SC 00000

4.1 TITLE

☒ Change ☐ Addition

TITLE ☐ DELETE

NAME DP
BROOKS, ROBERT D
STREET ADDRESS 1501 LADY ST
CITY- ST- ZIP COLUMBIA SC

5.1 TITLE

☒ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP

6.1 TITLE

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

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)(k), 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:

Mary M. Gardner

MARY M. GARDNER

4/10/96

803/748-2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)