

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 08 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 # **F62601** (2)

1. Corporation Name
USSOUTH HOLDING CORP.



Principal Place of Business 2071 MAIN STREET SARASOTA FL 34237 US	Mailing Address 2071 MAIN STREET SARASOTA FL 34237-6038 US
---	--

2. Principal Place of Business 21 8482 S. Tamiami Trail		2a. Mailing Address 26 8482 S. Tamiami Trail		3. Date Incorporated or Qualified 01/11/1982	3a. Date of Last Report 02/29/1996
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number 59-2153397	Applied For <input type="checkbox"/> Not Applicable
22 City & State 23 Sarasota Florida		27 City & State 28 Sarasota, Florida		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 24 34238		Country 25 Sarasota		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
29 34238		30 Sarasota		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent WEITZNER, ARTHUR S 2071 MAIN STREET SARASOTA FL 34237				10. Name and Address of New Registered Agent	
				81 Name Weitzner, Arthur S.	
				82 Street Address (P.O. Box Number is Not Acceptable) 8482 S. Tamiami Trail	
				83	
				84 City Sarasota	85 Zip Code FL 34238

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  **Arthur S. Weitzner** DATE **2/11/97**
(NOTE: Registered Agent Signature Required When Reinstalling)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE VD	<input checked="" type="checkbox"/> DELETE	1.1 TITLE VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME WEITZNER, BRIGITTE		1.2 NAME Weitzner, Brigitte	
STREET ADDRESS 2071 MAIN STREET		1.3 STREET ADDRESS 8482 S. Tamiami Trail	
CITY-ST-ZIP SARASOTA FL		1.4 CITY-ST-ZIP Sarasota, FL 34238	
TITLE PD	<input checked="" type="checkbox"/> DELETE	2.1 TITLE PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME WEITZNER, ARTHUR S		2.2 NAME Weitzner, Arthur S.	
STREET ADDRESS 2071 MAIN STREET		2.3 STREET ADDRESS 8482 S. Tamiami Trail	
CITY-ST-ZIP SARASOTA FL		2.4 CITY-ST-ZIP Sarasota, FL 34238	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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:  **Arthur S. Weitzner** (941) 918-0998
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)