

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F92000000135 (5)

1. Corporation Name

GOLFSOUTH CAPITAL, INC.

Principal Place of Business

880 S PLEASANTBURG
GREENVILLE SC 29607

Mailing Address

PO BOX 2324
GREENVILLE SC 29607



2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

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30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

11/06/1992

3a. Date of Last Report

06/26/1995

4. FEI Number

57-0956860

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

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH 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 of the individual who is changing the registered office or agent

Signature of the individual who is accepting the appointment as registered agent

Date

12. OFFICERS AND DIRECTORS

TITLE	PS	☐ DELETE
NAME	HUNTER, DERRELL E	
STREET ADDRESS	P. O. BOX 2324 N/A	
CITY - ST - ZIP	GREENVILLE SC	
TITLE	V	☐ DELETE
NAME	TUCK, NOEL B	
STREET ADDRESS	P. O. BOX 2324 N/A	
CITY - ST - ZIP	GREENVILLE SC	
TITLE	C	☐ DELETE
NAME	SOOLITTLE, M DEAN	
STREET ADDRESS	P O BOX 2324	
CITY - ST - ZIP	GREENVILLE SC	
TITLE	CD	☐ DELETE
NAME	TUCK, N. B	
STREET ADDRESS	P. O. BOX 2324 N/A	
CITY - ST - ZIP	GREENVILLE SC	
TITLE	V	☐ DELETE
NAME	WIGGINS, W P	
STREET ADDRESS	ONE DOUG FORD DRIVE	
CITY - ST - ZIP	PENSACOLA FL 32507	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	☐ Change ☐ Addition
1. TITLE	
2. NAME	
3. STREET ADDRESS	
4. CITY - ST - ZIP	
5. TITLE	
6. NAME	
7. STREET ADDRESS	
8. CITY - ST - ZIP	
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94. NAME	
95. STREET ADDRESS	
96. CITY - ST - ZIP	
97. TITLE	
98. NAME	
99. STREET ADDRESS	
100. 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 199.07(3)(a), 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 employed 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

4/29/96

847554656

CR2E034 (12/95)