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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## F9200000135 (5) DOCUMENT # 1. Corporation Name

GOLFSOUTH CAPITAL, INC.

Principal Place of Business	Mailing Address
880 S PLEASANTBURG	PO BOX 2324
GREENVILLE SC 29607	Greenville SC 29607

## **FILED** May 07 1998 8:00am Secretary of State



BBO S PLEASANTBURG PO BOX 2324 GREENVILLE SC 29607 GREENVILLE SC 29607				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  11/06/1992				
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Ap	plied For	
21 26					57 <b>-09</b> 56860	No	t Applicable	
Suite, Apt. #, etc.		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State		City & State	" <b>"</b>		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24	Country 25	7(p)	Country 30	/	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes No			
	9. Name and Address of Curre	nt Registered Agent		,	10. Name and Address of New Registere	d Agent		
CT	CORPORATION SYSTEM		81	Name				
	O SOUTH PINE ISLAND ROAD INTATION FL 33324		62	Street A	ddress (P.O. Box Number is Not Acceptable)			
			83					
ı			84	City	F	<b>85</b> Zip (	Code	
office or ri agent. Fai SIGNATURE	egistered agent, or both, in the State m familiar with, and accept the oblig Stondure, lyaed or perfect and of registered ag	of Horida, Such change was pations of, Section 607.0505, I	s authorized b Florida Statute	y the corpo	corporation submits this statement for the purpose oration's board of directors. I hereby accept the appearance of the purpose	opointment as	registered	
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AF			
TITLE	PS	L DELETE	1.1 ौ∏L€		PISID	<b>X</b> Change	☐ Addition	
NAME	HUNTER, DERRELL E		1.2 NAME					
STREET ADDRESS	P. O. BOX 2324 N/A GREENVILLE SC			ADDRESS				
CITY-ST-ZIP TITLE	V	DELETE	1.4 CHY- 2.1 TITLE	51 - Z(P		Change	Addition	
NAME	TUCK, NOEL B		2.2 NAME					
STREET ADDRESS	P. O. BOX 2324 N/A			ADDRESS	· ·			
CITY-ST-ZIP	GREENVILLE SC		2. 4 CITY-	ST-ZIP				
TITLE	C	DELETE	3.1 TITLE		<b>V</b>	Change	Addition	
NAME	DOOLITTLE, M D	·	3.2 NAME	١٠	RAYMOND F. HUTTON			
STREET ADDRESS	P O BOX 2324 N A			Ι.	BBO S. PLEAGANTBURG DR BREENVILLE, SC 29657			
CITY-ST-ZIP	GREENVILLE SC CD	DELETE	3.4. C(TY - 4.1 T(TLE	ST-ZIP	CIDIT	M Change	Addition	
TITLE	TUCK, N. B	[] DELETE	4.1 IHLE 4. 2 NAME		C101-1	Charles	L. Addition	
NAME STREET ADDRESS	P. O. BOX 2324 N/A			I ADORESS				
City-St-ZiP	GREENVILLE SC		4.4 CITY-					
TITLE	V	DELETE	5.1 TITLE			Change	Addition	
NAME	WIGGINS, W P		5.2 NAME					
STREET ADDRESS	737 PARKINS MILL ROAD		5.3 \$TREE	ADDRESS				
CITY-ST-ZIP	GREENVILLE SC 29607		5.4 CITY-	ST-ZIP			· · · · · · · · · · · · · · · · · · ·	
TITLE		☐ DELETE	6.1 TITLE			Change	Addition	
NAME			6.2 NAME					
STREET ADDRESS				F ADORESS				
CITY-ST-ZIP			6.4 CITY -	ST-ZIP				

14. Thereby 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 eath; 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.