

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

FILED

Apr 29 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 # H09100 (9)

1. Corporation Name
LIBCO OF FLORIDA, INC.

Principal Place of Business

P. O. BOX 789
GREENVILLE SC 29602

Mailing Address

P. O. BOX 789
GREENVILLE SC 29602-0789

3. Date Incorporated or Qualified
06/22/1984

3a. Date of Last Report
04/26/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.
22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.
27 City & State

28 Zip

29 Country

4. FEI Number
57-0783469

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

COMMANDER, CHARLES E.
200 LAURA ST
JACKSONVILLE FL 32202

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME CD
STREET ADDRESS ROSE, PORTER B.
CITY-ST-ZIP 2000 WADE HAMPTON BLVD.
GREENVILLE SC

TITLE ☐ DELETE
NAME SUMEREL, RICHARD H.
STREET ADDRESS 2000 WADE HAMPTON BLVD.
CITY-ST-ZIP GREENVILLE SC

TITLE ☐ DELETE
NAME COLEMAN, ROBERT T
STREET ADDRESS 2000 WADE HAMPTON BLVD
CITY-ST-ZIP GREENVILLE SC

TITLE ☐ DELETE
NAME PATTERSON, III, W, JOEL
STREET ADDRESS 2000 WADE HAMPTON BLVD.
CITY-ST-ZIP GREENVILLE SC

TITLE ☐ DELETE
NAME VINSON, G. M
STREET ADDRESS 2000 WADE HAMPTON RD.
CITY-ST-ZIP GREENVILLE SC

TITLE ☐ DELETE
NAME AT
STREET ADDRESS MARTHA R. RAINEY
CITY-ST-ZIP 2000 WADE HAMPTON BLVD
GREENVILLE SC

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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: Martha R. Rainey

4/22/97

864/609-8280

CR2E034 (9/96)