

01251993 90024 003 \$900.00 \$150.00

PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P37919 1. Corporation Name INVESTMENT COMPANY OF THE SOUTH, INC.		01-100-5724	

Principal Place of Business 100 CENTERVIEW DRIVE, SUITE 171 BIRMINGHAM AL 35216	Mailing Address 100 CENTERVIEW DRIVE, SUITE 171 BIRMINGHAM AL 35216
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2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324
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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: James P. Panico DATE: 9/26/99
(Signature, typed or printed name of registered agent, and title if applicable) (NOT Registered Agent signature req. red when re-registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	11. TITLE	☐ Change	☐ Addition
NAME	12. NAME		
STREET ADDRESS	13. STREET ADDRESS		
CITY-STATE-ZIP	14. CITY-STATE-ZIP	☐ Change	☐ Addition
TITLE	21. TITLE		
NAME	22. NAME		
STREET ADDRESS	23. STREET ADDRESS		
CITY-STATE-ZIP	24. CITY-STATE-ZIP	☐ Change	☐ Addition
TITLE	31. TITLE		
NAME	32. NAME		
STREET ADDRESS	33. STREET ADDRESS		
CITY-STATE-ZIP	34. CITY-STATE-ZIP	☐ Change	☐ Addition
TITLE	41. TITLE		
NAME	42. NAME		
STREET ADDRESS	43. STREET ADDRESS		
CITY-STATE-ZIP	44. CITY-STATE-ZIP	☐ Change	☐ Addition
TITLE	51. TITLE		
NAME	52. NAME		
STREET ADDRESS	53. STREET ADDRESS		
CITY-STATE-ZIP	54. CITY-STATE-ZIP	☐ Change	☐ Addition
TITLE	61. TITLE		
NAME	62. NAME		
STREET ADDRESS	63. STREET ADDRESS		
CITY-STATE-ZIP	64. CITY-STATE-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.01(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 in an attachment with an address, with all other like empowered.

SIGNATURE: FRANK BAREFIELD, JR. DATE: 9/26/99
(Signature, typed or printed name of signing officer or director)

FILED
 99 OCT -4 AM 11:08
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



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