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Apr 30 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 705318 (4)
1. Corporation Name
SOUTHSIDE BAPTIST CHURCH HOLDING COMPANY, INC.



Principal Place of Business Mailing Address
310 LAURA LEE AVENUE 310 LAURA LEE AVENUE
TALLAHASSEE FL 32301 TALLAHASSEE FL 32301-6967

3. Date Incorporated or Qualified 03/12/1963 3a. Date of Last Report 04/26/1996

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29	4. FEI Number 59-1159322 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

NOLAN, LARRY S.
2524 STONEHOUSE COURT
TALLAHASSEE FL 32301

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	GARGUS, GARY	1.2 NAME	
STREET ADDRESS	3014 KEVIN STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE, FL 00000	1.4 CITY-ST-ZIP	
TITLE	V ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	MCKENDREE, JAMES	2.2 NAME	
STREET ADDRESS	1142 WALDEN ROAD	2.3 STREET ADDRESS	
CITY-ST-ZIP	TALLHASSEE, FL 00000	2.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	WILLIAMS, M L	3.2 NAME	
STREET ADDRESS	3091 LAKEVIEW DR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE, FL 00000	3.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	POPE, RALPH	4.2 NAME	
STREET ADDRESS	8625 TRAM ROAD	4.3 STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE, FL 00000	4.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	MATTHEWS, J EDWARD	5.2 NAME	
STREET ADDRESS	511 LYNDALE	5.3 STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE, FL 00000	5.4 CITY-ST-ZIP	
TITLE	ST ☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	NOLAN, LARRY S.	6.2 NAME	
STREET ADDRESS	2524 STONEHOUSE CT	6.3 STREET ADDRESS	
CITY-ST-ZIP	TALLHASSEE, FL 00000	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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Larry S. Nolan 4-21-97 904-921-5057
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0007437

CR2E037 (9/96)