FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT **1999**

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 06, 1999 8:00 am
Secretary of State
05-06-1999 90123 016 ****61.25

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DOCUMENT # 705318

1. Corporation Name
SOUTHSIDE BAPTIST CHURCH HOLDING COMPANY, INC.

503904 - 90123 - 16

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

2. Principal Place of Business
21 536 North Monroe St
22 Suite, Apt. #, etc.
23 City & State
24 Zip 25 Country

2a. Mailing Address
26 P O Box 7499
27 Suite, Apt. #, etc.
28 City & State
29 Zip 32314 30 Country

3. Date Incorporated or Qualifed
03/12/1963

4. FEI Number
59-1159322
☐ Applied For
☐ Not Applicable

5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 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, with all other like empowered.

SIGNATURE: Larry S. Nolan **SIGNATURE REQUIRED** Larry S Nolan 4-29-99 850-921-3249
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (11/98)