

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 705318

1. Entity Name

SOUTHSIDE BAPTIST CHURCH HOLDING COMPANY, INC.

FILED
May 16, 2000 8:00 am
Secretary of State

05-16-2000 90803 015 ****61.25

Principal Place of Business 536 N MONROE ST TALLAHASSEE FL 32301	Mailing Address PO BOX 7499 TALLAHASSEE FL 32314-7499
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc. City & State Zip		3. Mailing Address Suite, Apt. #, etc. City & State Zip	
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4. FEI Number 59-1159322	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent NOLAN, LARRY S. 2524 STONEHOUSE COURT TALLAHASSEE FL 32301	
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

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

**FILE NOW:
FEE IS \$61.25**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GARGUS, GARY 3014 KEVIN STREET TALLAHASSEE, FL 00000 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MCKENDREE, JAMES 1142 WALDEN ROAD TALLAHASSEE, FL 00000 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMS, M-L 3091 LAKEVIEW DR. TALLAHASSEE, FL 00000 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D POPE, RALPH 8625 TRAM ROAD TALLAHASSEE, FL 00000 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MATTHEWS, J EDWARD 511 LYNDALE TALLAHASSEE, FL 00000 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST NOLAN, LARRY S. 2524 STONEHOUSE CT TALLAHASSEE, FL 00000 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Nolan, Larry S 2524 Stonehouse Ct Tallahassee FL 32301 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S William Perrine 267 Ross Road Tallahassee FL 32310 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Nelson, O.C. 7070 Carmel Drive Tallahassee FL 32308 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Johnson, E.N. 41 Quail Ct Crawfordville FL 32327 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Gargus, Gary 2041 Forest Glen Ct Tallahassee FL 32303 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V McKendree James 1142 Walden Road Tallahassee FL 32311 ☒ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Larry S Nolan **REQUIRE** Larry S Nolan 4-28-00 921-3249
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)

