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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 812778

1. Corporation Name
MORAVIAN CHURCH IN AMERICA, SOUTHERN PROVINCE

Principal Place of Business 459 S. CHURCH ST. WINSTON-SALEM NC	Mailing Address P. O. DRAWER M WINSTON-SALEM NC 27108
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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	3. Date Incorporated or Qualified 05/12/1958	4. FEI Number 56-0552778	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required		
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees		

9. Name and Address of Current Registered Agent

MOTSINGER, JOHN JR.ESQ.
201 N. PALMETTO AVE.
ORLANDO FL 32801

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	D <input checked="" type="checkbox"/> DELETE	1.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BARRY, HILDA S.	1.2 NAME	BETTY R BOMBICK
STREET ADDRESS	4163 GLENN HIGH DR.	1.3 STREET ADDRESS	817 GALES AVE.
CITY-ST-ZIP	WINSTON-SALEM NC	1.4 CITY-ST-ZIP	WINSTON-SALEM NC 27103
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SAPP, LANE A.	2.2 NAME	
STREET ADDRESS	600 HOLLY AVENUE	2.3 STREET ADDRESS	
CITY-ST-ZIP	WINSTON-SALEM NC	2.4 CITY-ST-ZIP	
TITLE	ST <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARTNER, RICHARD H.	3.2 NAME	
STREET ADDRESS	459 S. CHURCH ST.	3.3 STREET ADDRESS	
CITY-ST-ZIP	WINSTON-SALEM NC	3.4 CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SAWYER, ROBERT E	4.2 NAME	
STREET ADDRESS	459 S. CHURCH STREET	4.3 STREET ADDRESS	
CITY-ST-ZIP	WINSTON-SALEM NC	4.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	5.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SIDES, RICHARD L	5.2 NAME	G. Thomas Shelton
STREET ADDRESS	1642 PEMBROKE DRIVE	5.3 STREET ADDRESS	2086 Friedberg Rd
CITY-ST-ZIP	WINSTON-SALEM NC 27103	5.4 CITY-ST-ZIP	WINSTON-SALEM NC 27127
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	D <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOHNSON, GEORGE E	6.2 NAME	JOHNSON GEORGE E
STREET ADDRESS	P O BOX 12486 N/A	6.3 STREET ADDRESS	3666 Olindeale Ave
CITY-ST-ZIP	WINSTON-SALEM NC	6.4 CITY-ST-ZIP	PFAFFTOWN NC 27040

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 empowers.

SIGNATURE: Richard H. Cartner DATE: 1-19-99 DAYTIME PHONE #: 336/722-7922

CR2E037 (1/1/98)