

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 APR 11 PM 9:46

DOCUMENT # 837910 (9)
1. Corporation Name
SOUTHERN BAPTIST FOUNDATION INCORPORATED

Principal Place of Business

Mailing Address

**901 COMMERCE STREET SUITE 700
NASHVILLE TN 37203-3697**

**901 COMMERCE STREET SUITE 700
NASHVILLE TN 37203-3697**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/23/1977

3a. Date of Last Report

03/29/1994

4. FEI Number

62-0508097

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**

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐

**\$68.75 Supplemental
Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**FOREMAN, MICHAEL L.
2033 MAIN STREET, SUITE 600
SARASOTA FL 34237**

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 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	TC
NAME	LOVELL, WILLIAM C, JR
STREET ADDRESS	1519 LIPSCOMB DR
CITY - ST - ZIP	BRENTWOOD TN
TITLE	TVC
NAME	BRANNAN, LEONARD M
STREET ADDRESS	438 ANTELOPE TRAIL
CITY - ST - ZIP	CHATTANOOGA TN
TITLE	S
NAME	DEPUE, ROY L
STREET ADDRESS	1062 SUNSET DR
CITY - ST - ZIP	GALLATIN TN
TITLE	P
NAME	JOHNSON, HOLLIS E., III
STREET ADDRESS	901 COMMERCE ST
CITY - ST - ZIP	NASHVILLE, TN 3
TITLE	S
NAME	LIBBY, BETTY J.
STREET ADDRESS	2808 BLUE BRICK DRIVE
CITY - ST - ZIP	NASHVILLE TN
TITLE	TVP
NAME	ALBRIGHT, FAYE S.
STREET ADDRESS	504 BRAMBLEWOOD DRIVE
CITY - ST - ZIP	NASHVILLE TN

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	C/Tr	☒ Change ☐ Addition
1.2 NAME	Leonard M. Brannan	
1.3 STREET ADDRESS	438 Antelope Trail	
1.4 CITY - ST - ZIP	Chattanooga, Tennessee 37415	
2.1 TITLE	V-C/Tr	☒ Change ☐ Addition
2.2 NAME	M. Terry Turner	
2.3 STREET ADDRESS	812 Jones Parkway	
2.4 CITY - ST - ZIP	Brentwood, Tennessee 37027	
3.1 TITLE	S/Tr	☒ Change ☐ Addition
3.2 NAME	Roy L. DePue	
3.3 STREET ADDRESS	1062 Sunset Drive	
3.4 CITY - ST - ZIP	Gallatin, Tennessee 37066	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Hollis E. Johnson, III
Hollis E. Johnson, III, President

4/4/95

615-254-8823

Date

Daytime Phone #