

FILE NOW: FILING FEE IS \$61.25

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NONPROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 846343

1. Corporation Name

THE SUNDAY SCHOOL BOARD OF THE SOUTHERN BAPTIST  
CONVENTION, INC.

Principal Place of Business

127 NINTH AVE. N.  
NASHVILLE TN 37234

Mailing Address

127 NINTH AVE. N.  
NASHVILLE TN 37234

*Handwritten initials*



2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	06/27/1980
22 City & State	27 City & State	4. FEI Number
23 Zip	28 Zip	62-0505208
24 Country	29 Country	Applied For
	30	Not Applicable
5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing		<input type="checkbox"/> \$5.00 May Be Added to Fees
Trust Fund Contribution		

8. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RICHARDSON, WAYNE ✓  
~~1320 HENDRICKS AVE~~  
~~JACKSONVILLE FL FL 32207~~

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
Regency Park Shopping Center
83 9400 Atlantic Blvd
84 City Jacksonville
85 Zip Code 32225

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DRAPER, JAMES T., JR.	1.2 NAME	
STREET ADDRESS	5606 GRANNY WHITE	1.3 STREET ADDRESS	600002778396--2
CITY-ST-ZIP	BRENTWOOD TN	1.4 CITY-ST-ZIP	-02/17/99--01073--002
TITLE	T	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARTER, JIMMIE B	2.2 NAME	
STREET ADDRESS	108 TUDOR CT.	2.3 STREET ADDRESS	*****61.25 *****61.25
CITY-ST-ZIP	FRANKLIN TN 37067	2.4 CITY-ST-ZIP	
TITLE	S	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FINNEY, NORMAN W.	3.2 NAME	
STREET ADDRESS	1721 DICKERSON BAY DRIVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	GALLATIN TN	3.4 CITY-ST-ZIP	
TITLE	T	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ADAMS, JEAN R	4.2 NAME	
STREET ADDRESS	6004 41ST AVE.	4.3 STREET ADDRESS	
CITY-ST-ZIP	HYATTSVILLE MD 20782-3058	4.4 CITY-ST-ZIP	
TITLE	T	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DE ARMS, RAFAEL	5.2 NAME	
STREET ADDRESS	1309 E. ROBINSON	5.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32801	5.4 CITY-ST-ZIP	
TITLE	T	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BAKER, MICHELLE	6.2 NAME	
STREET ADDRESS	1740 S WATER	6.3 STREET ADDRESS	
CITY-ST-ZIP	WICHITA KS 67213	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: *Norman W. Finney* Norman W. Finney 1/20/99 615/251-3860

CR2E037 (11/98)