FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 708886

1. Corporation Name

SOUTHSIDE BAPTIST CHURCH, INC.

Principal Place of Business

Mailing Address

902 S. SPRING GARDEN AVENUE DELAND FL 32720

902 S. SPRING GARDEN AVENUE DELAND FL 32720

FILED Apr 21, 1999 8:00 am Secretary of State

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2. Principal P	lace of Business 2a. Mailing Address					3. Date Incorporated or Qualifed					
21		26					05/04/1965				
Suite, Apt.	, etc. Suite, Apt. #, etc.						FEI Number	 	Applied For		
22		27				<u> </u>	59-1624169		Applicable		
City & State	ate City & State					5. Certificate of Status Desired \$8.75 Additional Fee Require					
Zip	Country	Zip	Cour	ntrv		-	Election Compaign Financing	\$5.00	May Po		
—, ·	25 29 30					6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees					
24 25 29 30 9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent						
	J. Hame and Address of Carone	togiotoroa Agoin	81	Name				_			
ANDERSON, ALMA G					82 Street Address (P.O. Box Number is Not Acceptable)						
1111 WILD OAK TERR					[00]						
DELAND F	L 32720-6520		ĺ	83							
ı	The first of god					FL 85 Zip Code					
11 Durant to the explisions of Sections 617 0502 and 617 1508. Florida Statutes, the above-named comporation 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 a			Agen	t signature required v		einstating) DATE ADDITIONS/CHANGES TO OFFICERS A	WID DIDECTOR	DS IN 12		
12.	OFFICERS AND		13.				ADDITIONS/CHANGES TO OFFICERS A	Change	Addition		
TITLE	P	☐ DELETE	1.1 TITI				•	□ cuange			
NAME.	NICHOLSON, JACK		1.2 NA	ME	į						
STREET ADDRESS	227 NO. KEPLER RD 138			REET	ADDRESS						
CITY-ST-ZIP	DELAND FL		1.4 CIT		FZIP						
πιε	D	☐ DELETE	2.1 7177	Œ				Change	☐ Addition		
NAME	REZABEK, MONICA		2.2 NA	ME	-				·		
STREET ADDRESS	s 4152 FOXWOOD TR 238			2.3 STREET ADDRESS					}		
CITY-ST-ZIP	DELAND FL 2.40			TY-S	T-ZIP						
TITLE	S	☐ DELETE	3.1 7171	LE				Change	☐ Addition		
NAME .	Warensford, Judith A		3.2 NA	ME							
STREET ADDRESS	631 W BLUE LAKE TERR		3.3 ST	REET	ADDRESS				Ì		
CITY-ST-ZIP	DELAND FL		3.4. CIT	!Y-S	T-ZIP						
TITLE	T	☐ DELETE	4.1 1711					☐ Change	Addition		
NAME	WARENSFORD, JUDITH A		4. 2 NA	ME							
STREET ADDRESS	631 W BLUE LAKE TERR		4.3 STF	REET	ADDRESS				}		
CITY-ST-ZIP	DELAND FL		4.4 CIT								
TITLE	D	☐ DELETE	5.1 TiT					Change	☐ Addition		
NAME	CORNING. DAVID		5.2 NA	ΜE							
_	215 ROBINHOOD DR		5.3 STF	REET	ADDRESS				ļ		
CITY-ST-ZIP:	DELAND FL-32724		5.4 CIT	Y-\$1	r-zip						
		☐ DELETE	6.1 TITI					Change	Addition		
		<u> </u>	6.2 NA	ME.				_			
NAME STREET ADDRESS	教队 授		6.3 STF	REET	ADDRESS		•				
CITY-ST-ZIP			6.4 CET	Y-S1	[-ZI P				İ		
GHT-SI-/IP											

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: