

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **718381**

1. Entity Name

SOUTHEASTERN CONFERENCE ON LINGUISTICS, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

00 SEP 28 AM 6:16

Principal Place of Business Mailing Address
Dept. of English **Dept. of English**
UNC Charlotte **UNC Charlotte**
9201 University City Blvd. **9201 University City Blvd.**
Charlotte NC 28223-0001 **Charlotte NC 28223-0001**

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **62-1188009** Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Chu, Chauncey C.
3403 NW 7th Place
Gainesville FL 32607

Name
 Street Address (P.O. Box Number is Not Acceptable)
888883417828 7
-10/09/00--01005--002
 City *******70.PL** *******70.00**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

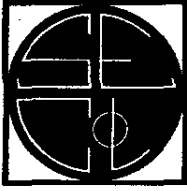
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST Bongartz, Christiane Dept. of English, UNC Charlotte Charlotte NC 28223-0001	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Nunnally, Thomas Dept. of English, Auburn U Auburn AL 36849	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Wolfram, Walt Dept. of English, NC State U Raleigh NC 27695-8105	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Weatherly, Joan Dept. of English, Auburn U Auburn AL 36849	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Little, Greta Linguistics Program, U of SC Columbia SC 29208	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST Thiede, Ralf Dept. of English, UNC Charlotte Charlotte NC 28223-0001	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Maynor, Natalie Dept. of English, Mississippi State U Mississippi State MS 39762-5505	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Bernstein, Cynthia G. Dept. of English, U of Memphis Memphis TN 38152	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Sara L. Sanders Dept. of English, Coastal Carolina U Conway SC 29526	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Bailey, Guy Provost, U Texas at San Antonio San Antonio TX 78249-0643	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Montgomery, Michael Dept. of English, U of SC Columbia SC 29208	<input type="checkbox"/> Change <input checked="" type="checkbox"/> 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: Ralf Thiede Ralf Thiede 09-26-2000 (704) 687-4227
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)



Southeastern Conference on Linguistics

The University of North Carolina at Charlotte
English Language Studies – Dept. of English
9201 University City Blvd.
Charlotte NC 29223-0001

Southern Journal of Linguistics

Office of the Editor
Fax: (704) 687-3961

September 26, 2000

To: **Division of Corporations**
P.O. Box 6327
Tallahassee FL 32314

From: Ralf Thiede

re: nonprofit incorporation 2000
your sign: lsellers
09-18-2000

Dear Corporation Officer,

Possibly due to the relocation of our headquarters to the University of North Carolina at Charlotte, we have not received the year 2000 Uniform Business Report form 200 (at either the old or the new location). I have talked to an agent at your office on Sept. 18, 2000 who sent me a blank form and recommended that I send this to you post haste. I respectfully request that you kindly reinstate the Southeastern Conference on Linguistics and please waive any late fee that would otherwise apply.

With kind regards,

Ralf Thiede
Editor and Executive Secretary, SECOL

Ronald F. Lunsford
Editorial Board
email: rflunso@email.uncc.edu
tel.: (704) 687-4223

Boyd H. Davis
Editorial Board
email: bdavis@email.uncc.edu
tel.: (704) 687-4209

Ralf Thiede
Editor, Executive Secretary
email: rthiede@email.uncc.edu
tel.: (704) 687-4227