2001 UNIFORM BUSINESS REPORT (UBR)

Mailing Address

DOCUMENT # 722237

of the corporation or the received

SIGNATURE:

Principal Place of Business

THE SOUTHSIDE BAPTIST CHURCH ENDOWMENT FUND, INC

310 MCDONALD STREET 310 MCDONALD STREET 42348 LAKELAND FL 33803 LAKELAND FL 33803 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number NOT APPLICABLE Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) HERRING, RONALD 2654 HANDLEY BLVD **LAKELAND FL 33803** Zip Code City FL 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. 4 - 25 - 01SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Change XXAddition CR2E037 (10/00 Delete TITLE TITLE John Bohanan NAME NAME PLEMONS, RONNEY L. 1215 O'Doniel Loop North STREET ADDRESS STREET ADDRESS 2313 BRISTOL Lakeland, FL 33809 CITY-ST-ZIP CITY-ST-ZIP LAKELAND FL 33803 ☐ Delete TITLE ☐ Change **X**Addition TITLE Nina J. Lane NAME BRUNSON, LENTON NAME 1006 Susan Drive STREET ADDRESS STREET ADDRESS 2322 EDEN PARKWAY Lakeland, FL 33803 CITY-ST-7IP CITY-ST-ZIP LAKELAND FL 33803 Change ☐ Addition TITLE ☐ Delete TITLE HERRING, RONALD NAME NAME STREET ADDRESS STREET ADDRESS 2654 HANDLEY BLVD. CITY-ST-7IP CITY-ST-ZIP LAKELAND FL 33803 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME GIEGER, MACK NAME STREET ADDRESS STREET ADDRESS 5619 STRATFORD LANE CITY-ST-ZIP CITY-ST-ZIP LAKELAND FL 33813 ☐ Change Addition Delete TITLE TITLE NAME NAME DENNIS, SCOTT STREET ADDRESS STREET ADDRESS 2229 GINGER WAY CITY-ST-ZIP CITY-ST-ZIP LAKELAND FL ☐ Change Addition X Delete TITLE TITLE NASH, DAVID NAME STREET ADDRESS 1100 OAKBRIDGE PKWY #176 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAKELAND FL 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 trugtee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

4-25-01

Daytime Phone #

all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 05, 2001 8:00 am Secretary of State

05-05-2001 90700 001 ***140.00