

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 817720

FILED
Jan 09, 2006
Secretary of State

Entity Name: THE SOUTHERN METHODIST CHURCH

Current Principal Place of Business:

425 BROUGHTON STREET
ORANGEBURG, SC 29115 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 39
ORANGEBURG, SC 291160039 US

New Mailing Address:

FEI Number: 57-6029243

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COKER, BARRY L.
1820 MORNINGSIDE DR.
PENSACOLA, FL 32503 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: CLARK, CECIL
Address: 425 BROUGHTON STREET
City-St-Zip: ORANGEBURG, SC 29115

Title: P () Delete
Name: LANDERS, BEDFORD F
Address: 245 PERRYCLEAR STREET NW
City-St-Zip: ORANGEBURG, SC 29115

Title: V () Delete
Name: WAITES, ROBERT F JR
Address: 220 SOUTH TRACE LANE
City-St-Zip: HOOVER, AL 35244

Title: D () Delete
Name: LIVINGTON JR, PERRY F
Address: 950 LIVINGSTON ROAD
City-St-Zip: POMARIA, SC 29126

Title: D () Delete
Name: FULMER, PHILIP C DR
Address: 1048 DUDLEY ROAD
City-St-Zip: MARION, SC 29571

Title: D () Delete
Name: THIGPEN, PAUL D
Address: 1665 PHILADELPHIA STREET
City-St-Zip: DARLINGTON, SC 29532

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CECIL CLARK

S

01/09/2006

Electronic Signature of Signing Officer or Director

Date