2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723567

FILED Apr 29, 2005 Secretary of State

Entity Name: WESLEY UNITED METHODIST CHURCH OF MARCO ISLAND, INC.

Current Principal Place of Business: New Principal Place of Business: 350 SOUTH BARFIELD DRIVE MARCO ISLAND, FL 34145 **Current Mailing Address: New Mailing Address:** 350 SOUTH BARFIELD DRIVE MARCO ISLAND, FL 34145 US FEI Number: 59-1298893 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BARRETT, JOAN F 1282 RIALTO WAY #101 NAPLES, FL 34114 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition WENTLAND, RICHARD Name: Name: 351 SCOTT DRIVE Address: Address: City-St-Zip: MARCO ISLAND, FL 34145 City-St-Zip: Title: Title: (X) Change () Addition () Delete BEACH, JOAN Name: ELLIOTT, WILLIAM Name: Address: 440 EDGEWATER CT Address: 1051 SWALLOW AVE #108 City-St-Zip: MARCO ISLAND, FL 34145 City-St-Zip: MARCO ISLAND, FL 34145 Title: () Delete Title: (X) Change () Addition THACHER, THOMAS FREY, GREG Name: Name: Address: 348 WATER LEAF CT. Address: P O BOX 821 City-St-Zip: MARCO ISLAND, FL 34145 City-St-Zip: MARCO ISLAND, FL 34146 () Delete Title: Title: () Change () Addition Name: HOUSEWERT, MIKE Name: Address: 41 HICKORY CT. Address: City-St-Zip: MARCO ISLAND, FL 34145 City-St-Zip: Title: () Delete Title: () Change () Addition RENTZ, TOM Name: Name: 1790 ADDISON CT. Address: Address: City-St-Zip: MARCO ISLAND, FL 34145 City-St-Zip: Title: () Delete Title: (X) Change () Addition FREY, GREG GRAY BOB Name: Name: Address: P O BOX 821 Address: 1011 SWALLOW #309 MARCO ISLAND, FL 34146 MARCO ISLAND, FL 34145 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROBERT ATWOOD T 04/29/2005