2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2004
Secretary of State

DOCUMENT# N00000001715

Entity Name: FLORIDA AGRICULTURAL AND MECHANICAL UNIVERSITY WESLEY FOUNDATION, INC.

Current Principal Place of Business:

3370 CAPITAL CIR. NE, SUITE C-1
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 13766
TALLAHASSEE, FL 32317

New Mailing Address:

FEI Number: 59-2354856 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WEAVER, CHARLES E
3370 CAPITAL CIR. NE, SUITE C-1
TALLAHASSEE, FL 32308

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: C ( ) Delete
Name: LUMPKIN, RONALD
Address: 5001 BRANDED OAKS CIRCLE
City-St-Zip: TALLAHASSEE, FL 32311

Title: VC ( ) Delete
Name: BENNETT, EDNA
Address: 3312 NORTHSHORE CR
City-St-Zip: TALLAHASSEE, FL 32312

Title: T ( ) Delete
Name: ANDREWS, RICHARD
Address: 1331 CHERRY ST
City-St-Zip: TALLAHASSEE, FL 32303

Title: S ( ) Delete
Name: OWENBY, ERMINE
Address: 817 ELIZABETH DRIVE
City-St-Zip: TALLAHASSEE, FL 32303

Title: D ( ) Delete
Name: BARRINER, LAWRENCE
Address: 6597 MAN-O-WAR TRAIL
City-St-Zip: TALLAHASSEE, FL 32308

Title: D ( ) Delete
Name: DEAN, DELORES
Address: 505 HOWARD AVENUE
City-St-Zip: TALLAHASSEE, FL 32310

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:

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

Title: ( ) Change ( ) Addition
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 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: RICHARD ANDREWS T 04/10/2004
Electronic Signature of Signing Officer or Director — Date