

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004106

FILED
Aug 29, 2004
Secretary of State**Entity Name:** THE WESLEY FOUNDATION OF NORTHWEST FLORIDA, INC.**Current Principal Place of Business:**ST. LUKE UMC
1394 E. NINE MILE RD.
PENSACOLA, FL 32514**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 10934
PENSACOLA, FL 32524**New Mailing Address:****FEI Number:** 59-2991537**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**POPE, KAREN P
4340 COSTA MESA
PENSACOLA, FL 32501 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:** P () Delete
Name: BAILEY, BOB REV
Address: 208 PACE PARKWAY
City-St-Zip: CANTONMENT, FL 32533**Title:** D () Delete
Name: COOK, CHRISTINE
Address: 5020 REGATO
City-St-Zip: PENSACOLA, FL 32526**Title:** S () Delete
Name: BARKER, MARGNETTE
Address: 6300 HERMITAGE DR
City-St-Zip: PENSACOLA, FL 32504**Title:** T () Delete
Name: POPE, KAREN T
Address: 4340 COSTA MESA
City-St-Zip: PENSACOLA, FL 32504**Title:** D () Delete
Name: HELEN WENTWORTH,
Address: 8380 N PALAFOX
City-St-Zip: PENSACOLA, FL 32514**Title:** MRS () Delete
Name: BROOKS, REDA
Address: 8200 CHIQUITA DR
City-St-Zip: PENSACOLA, FL 32534**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
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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: KAREN POPE

TD

08/29/2004

Electronic Signature of Signing Officer or Director

Date