2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004106

FILED Jan 25, 2012 Secretary of State

Entity Name: THE WESLEY FOUNDATION OF NORTHWEST FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

5725 N. 9TH AVENUE PENSACOLA, FL 32504

Current Mailing Address: New Mailing Address:

5725 NORTH 9TH AVE C/O STUART WORTH PENSACOLA, FL 32504

FEI Number: 59-2991537 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PORTER, WILHELMINA T MS 5725 NORTH 9TH AVE PENSACOLA, FL 32504 US

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: F

Name: TIMBERLAKE, CANDY MRS Address: 11621 CLEAR CREEK DR City-St-Zip: PENSACOLA, FL 32514

Title:

Name: LENTZ, GEOFFREY MR Address: 6 EAST WRIGHT City-St-Zip: PENSACOLA, FL 32504

Title:

Name: MCBRIDE, PATRICK MR Address: 1030 N 57TH AVE City-St-Zip: PENSACOLA, FL 32506

Title: T

Name: PORTER, WILHELMINA T MS Address: 5725 NORTH 9TH AVE City-St-Zip: PENSACOLA, FL 32504

Title:

Name: CAPES, EMILY MS
Address: 6 EAST WRIGHT ST.
City-St-Zip: PENSACOLA, FL 32504

Title: [

 Name:
 WORTH, STUART
 REV

 Address:
 5725 N 9TH AVE

 City-St-Zip:
 PENSACOLA, FL 32504

I hereby 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 all other like empowered.

SIGNATURE: MINA PORTER TREA 01/25/2012