2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702143

Entity Name: WESLEY MANOR, INC.

Current Principal Place of Business:

80 WEST LUCERNE CIRCLE ORLANDO, FL 32801

Current Mailing Address:

80 WEST LUCERNE CIRCLE ORLANDO, FL 32801 US

FEI Number: 59-0872675 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

KEITH, HENRY T 80 WEST LUCERNE CIRCLE ORLANDO, FL 32801 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

FILED Feb 11, 2014

Secretary of State

CC0183054780

Officer/Director Detail:

Title DIRECTOR Title EXECUTIVE VP/ASST. SECRETARY

Name BOGNER, JAMES B Name STEVENS, ROGER A

Address 80 WEST LUCERNE CIRCLE Address 80 WEST LUCERNE CIRCLE

City-State-Zip: ORLANDO FL 32801 City-State-Zip: ORLANDO FL 32801

Title DIRECTOR Title CHAIRMAN/PRESIDENT

Name PHILLIPS, MARJORIE J Name MILTON, V, JOHN

Address 80 WEST LUCERNE CIRCLE Address 80 WEST LUCERNE CIRCLE

City-State-Zip: ORLANDO FL 32801 City-State-Zip: ORLANDO FL 32801

Title SENIOR VP/TREASURER Title SECRETARY

Name KEITH, HENRY T Name DYE, STEPHEN R

Address 80 WEST LUCERNE CIRCLE Address 80 WEST LUCERNE CIRCLE

City-State-Zip: ORLANDO FL 32801 City-State-Zip: ORLANDO FL 32801

Title DIRECTOR Title DIRECTOR

Name BELL, WILLIAM O Name BUSTLE, D. GREG

Address 80 WEST LUCERNE CIRCLE Address 80 WEST LUCERNE CIRCLE

City-State-Zip: ORLANDO FL 32801 City-State-Zip: ORLANDO FL 32801

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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: ROGER A. STEVENS

EXECUTIVE VICE PRESIDENT

02/11/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

NameDODDRIDGE, JEANNIE GNameHILLENMEYER, JOHN WAddress80 WEST LUCERNE CIRCLEAddress80 WEST LUCERNE CIRCLE

City-State-Zip: ORLANDO FL 32801 City-State-Zip: ORLANDO FL 32801

TitleDIRECTORTitleDIRECTORNameMAY, BRUCE WNameMC CULLY, AL C

Address 80 WEST LUCERNE CIRCLE Address 80 WEST LUCERNE CIRCLE

City-State-Zip: ORLANDO FL 32801 City-State-Zip: ORLANDO FL 32801

Title DIRECTOR Title DIRECTOR

Name POLING, DEL R Name SHAFER, THOMAS L

Address 80 WEST LUCERNE CIRCLE Address 80 WEST LUCERNE CIRCLE

City-State-Zip: ORLANDO FL 32801 City-State-Zip: ORLANDO FL 32801

Title DIRECTOR Title DIRECTOR

Name STURM, RICHARD V Name AMLEY, EDWARD A

Address 80 WEST LUCERNE CIRCLE Address 80 WEST LUCERNE CIRCLE

City-State-Zip: ORLANDO FL 32801 City-State-Zip: ORLANDO FL 32801

Title DIRECTOR Title DIRECTOR

Name HALL, STEWART JR. Name MORGAN , HOWARD K

Address 80 WEST LUCERNE CIRCLE Address 80 WEST LUCERNE CIRCLE

City-State-Zip: ORLANDO FL 32801 City-State-Zip: ORLANDO FL 32801

Title DIRECTOR Title DIRECTOR

Name NOLIN, JOANN Name SHANNON, EUGENIA R

Address 80 WEST LUCERNE CIRCLE Address 80 WEST LUCERNE CIRCLE

City-State-Zip: ORLANDO FL 32801