

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 14, 2003 8:00 am
Secretary of State

01-27-2003 90317 013 ****61.25

1/27

DOCUMENT # 703340

1. Entity Name
**WESLEY MEMORIAL UNITED METHODIST CHURCH OF TAMPA
, INC.**



Principal Place of Business
**6100 MEMORIAL HIGHWAY
TAMPA FL 33615**

Mailing Address
**6100 MEMORIAL HIGHWAY
TAMPA FL 33615**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1306132**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**SMALL, HERMAN JR
6100 MEMORIAL HWY
TAMPA FL 33615**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

7. Name and Address of New Registered Agent

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Herman Small, Jr.

1-6-03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☒ Delete
NAME **DITTMAR, CHARLES H. JR.**
STREET ADDRESS **4711 TRAVERTINE DRIVE**
CITY-ST-ZIP **TAMPA FL**

TITLE **VPD** ☒ Delete
NAME **WETZEL, NORMAN**
STREET ADDRESS **8451 FLAG STONE DR**
CITY-ST-ZIP **TAMPA FL**

TITLE **SD** ☐ Delete
NAME **MULRINE, NORMA**
STREET ADDRESS **8325 BAY POINTE DRIVE #1203**
CITY-ST-ZIP **TAMPA FL**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VP** ☐ Change ☒ Addition
NAME **Smith, Charles**
STREET ADDRESS **6100 Memorial Hwy.**
CITY-ST-ZIP **Tampa, FL 33615**

TITLE **VPD** ☐ Change ☒ Addition
NAME **Joyner, Charles**
STREET ADDRESS **6100 Memorial Hwy.**
CITY-ST-ZIP **Tampa, FL 33615**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Herman Small, Jr.

1-6-03 (813) 886-2536

Date

Daytime Phone #

CR2E037 (10/02)