

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754836

FILED
Mar 24, 2009
Secretary of State

Entity Name: WESLEY UNITED METHODIST CHURCH, INC.

Current Principal Place of Business:

2075 MEADOWLANE AVENUE
WEST MELBOURNE, FL 32904

New Principal Place of Business:

Current Mailing Address:

2075 MEADOWLANE AVENUE
WEST MELBOURNE, FL 32904

New Mailing Address:

FEI Number: 59-1814608

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOSCHETTER, CHRIS
752 JOHN CARROLL LANE
WEST MELBOURNE, FL 32904 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: LOSCHETTER, CHRIS
Address: 752 JOHN CARROLL LANE
City-St-Zip: WEST MELBOURNE, FL 32904

Title: VP () Delete
Name: DAWKINS, JACK
Address: 2335 MICHIGAN STREET
City-St-Zip: WEST MELBOURNE, FL 32904

Title: S () Delete
Name: PETCH, JOHN
Address: 2880 N. WICKHAM ROAD APT. 211
City-St-Zip: MELBOURNE, FL 32935

Title: D () Delete
Name: STRAUB, PAM
Address: 525 TREND ROAD
City-St-Zip: WEST MELBOURNE, FL 32904

Title: D () Delete
Name: HINKLE, GLEN
Address: 2347 LYLEWOOD COURT
City-St-Zip: WEST MELBOURNE, FL 32904

Title: D () Delete
Name: GOODRICH, HOOD
Address: 2955 BRANDYWINE LANE
City-St-Zip: WEST MELBOURNE, FL 32904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: MCMILLEN, CARL
Address: 686 SHERIDAN WOODS DRIVE
City-St-Zip: WEST MELBOURNE, FL 32904

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 exemption stated in Chapter 119, 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: CHRIS LOSCHETTER

P

03/24/2009

Electronic Signature of Signing Officer or Director

Date