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Apr 09 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N04691 (4)

1. Corporation Name
VILLAS WESLEYAN CHURCH, INC.



Principal Place of Business C/O WALTER E. MCKEE, JR. 8400 BEACON BLVD. FT. MYERS FL 33907	Mailing Address C/O WALTER E. MCKEE, JR. 8400 BEACON BLVD. FT. MYERS FL 33907
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3. Date Incorporated or Qualified 08/14/1984		
4. FEI Number 59-1901803	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75	Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00	May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

**MCKEE, WALTER E., JR.
8400 BEACON BLVD.
FT. MYERS FL 33907**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *X* _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCKEE, WALTER E., JR.	1.2 NAME	
STREET ADDRESS	8400 BEACON BLVD.	1.3 STREET ADDRESS	
CITY-ST-ZIP	FT.MYERS FL	1.4 CITY-ST-ZIP	
TITLE	SD	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ULMER, JEAN	2.2 NAME	
STREET ADDRESS	2221 CARACAS CT	2.3 STREET ADDRESS	
CITY-ST-ZIP	FT MYERS FL	2.4 CITY-ST-ZIP	
TITLE	TD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LANOBO, EVELYN	3.2 NAME	
STREET ADDRESS	2318 KENT AVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT. MYERS FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PRESTON, GILBERT	4.2 NAME	
STREET ADDRESS	7218 MYRTLE RD. SE	4.3 STREET ADDRESS	
CITY-ST-ZIP	FT. MYERS FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOWKER, DAN	5.2 NAME	
STREET ADDRESS	2118 NE 20 AVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	CAPE CORAL FL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DESOUZA, LUTHER	6.2 NAME	
STREET ADDRESS	203 HENRY AVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	LEHIGH ACRES FL	6.4 CITY-ST-ZIP	

5.5 NAME	D	5.6 STREET ADDRESS	
5.7 CITY-ST-ZIP		5.8 CITY-ST-ZIP	
6.5 NAME	D	6.6 STREET ADDRESS	
6.7 CITY-ST-ZIP		6.8 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *X Walter E. McKee, Jr.* 3-31-98 941 934 5858

CR2E037 (10/97)