

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 23, 2002 8:00 am**  
**Secretary of State**

03-04-2002 90026 008 \*\*\*\*61.25

**DOCUMENT # N04691**

1. Entity Name

VILLAS WESLEYAN CHURCH, INC.

Principal Place of Business

Mailing Address

WALTER E. MCKEE, JR.  
 BEACON BLVD.  
 MYERS FL 33907

C/O WALTER E. MCKEE, JR.  
 8400 BEACON BLVD.  
 FT. MYERS FL 33907

2. Principal Place of Business

c/o John M. Rott

3. Mailing Address

c/o John M. Rott

Suite, Apt. #, etc.

8400 Beacon Blvd.

Suite, Apt. #, etc.

8400 Beacon Blvd.

City & State

Fort Myers, FL

City & State

Fort Myers, FL

Zip

33907

Country

USA

Zip

33907

Country

USA

6. Name and Address of Current Registered Agent

ROTT, JOHN M  
 8400 BEACON BLVD.  
 FT. MYERS FL 33907

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

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  
 Department of State

10. OFFICERS AND DIRECTORS

TITLE PD  
 NAME ROTT, JOHN M  
 STREET ADDRESS 8400 BEACON BLVD.  
 CITY-ST-ZIP FORT MYERS FL 33907  
*Pastor (Chairman)*

TITLE SD  
 NAME DESOUZA, ANJI  
 STREET ADDRESS 203 HENRY AVE.  
 CITY-ST-ZIP LEHIGH ACRES FL 33971  
*Secretary*

TITLE TD  
 NAME LANDBO, EVELYN  
 STREET ADDRESS 2318 KENT AVE  
 CITY-ST-ZIP FT. MYERS FL  
*Treasurer*

TITLE D  
 NAME BOLES, CHESTER  
 STREET ADDRESS 907 SW 4TH AVE  
 CITY-ST-ZIP CAPE CORAL FL 33991  
*Board Member*

TITLE D  
 NAME MCKEE, BRIAN  
 STREET ADDRESS 12944 SECOND ST  
 CITY-ST-ZIP FORT MYERS FL 33905  
*Board Member*

TITLE D  
 NAME JACKSON, JERRY  
 STREET ADDRESS 2160 TREEHAVEN CIR.  
 CITY-ST-ZIP FORT MYERS FL 33907  
*Vice Chairman*

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

TITLE  
 NAME Bowker, Dan  
 STREET ADDRESS 6630 Chappier Lane  
 CITY-ST-ZIP N. Ft. Myers, FL 33903  
*Board Member*  
☐ Change ☒ Addition

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

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

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:

SIGNATURE REQUIRED

2/18/02

941-936-5858

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)