

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04691

FILED
Mar 25, 2009
Secretary of State

Entity Name: VILLAS WESLEYAN CHURCH, INC.

Current Principal Place of Business:

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

New Principal Place of Business:

8400 BEACON BLVD.
FT. MYERS, FL 33907

Current Mailing Address:

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

New Mailing Address:

8400 BEACON BLVD.
FT. MYERS, FL 33907

FEI Number: 59-1901803

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

RADER, CLAYTON V
8400 BEACON BLVD..
FT. MYERS, FL 33907 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: CLAYTON V. RADER

03/25/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROTT, JOHN M
Address: 8400 BEACON BLVD.
City-St-Zip: FORT MYERS, FL 33907

Title: SD () Delete
Name: DESOUZA, ANJI
Address: 203 HENRY ST.
City-St-Zip: LEHIGH ACRES, FL 33971

Title: D () Delete
Name: EDMONDS, MICHAEL R
Address: 547 ELLIS ST. #A
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: D () Delete
Name: LATHER, BILL
Address: 2281 CRYSTAL DR
City-St-Zip: FORT MYERS, FL 33907

Title: D () Delete
Name: MCGINNESS, EILEEN
Address: 18317 OSTEBO DR. SE
City-St-Zip: FORT MYERS, FL 33967

Title: D () Delete
Name: JACKSON, JERRY
Address: 2160 TREEHAVEN CIR.
City-St-Zip: FORT MYERS, FL 33907

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RADER, CLAYTON V
Address: 8400 BEACON BLVD.
City-St-Zip: FORT MYERS, FL 33907

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

Title: D (X) Change () Addition
Name: JERRY, JACKSON
Address: 2160 TREEHAVEN CIRCLE
City-St-Zip: FORT MYERS, FL 33907

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

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

Title: D (X) Change () Addition
Name: KATHY, JOHNSON
Address: 5570 TRAILWINDS DRIVE #523
City-St-Zip: FORT MYERS, FL 33907

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: CLAYTON V. RADER

PD

03/25/2009

Electronic Signature of Signing Officer or Director

Date