2003 NOT-FOR-PROFIT CORPORATION

FILED Feb 26, 2003 8:00 am UNIFORM BUSINESS REPORT (UBR Secretary of State DOCUMENT # N04691 1. Entity Name 02-26-2003 90166 043 ****61.25 VILLAS WESLEYAN CHURCH, INC. Principal Place of Business Mailing Address C/O JOHN M ROTT C/O JOHN M ROTT 8400 BEACON BLVD. 8400 BEACON BLVD. FT. MYERS FL 33907 FT. MYERS FL 33907 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 59-1901803 Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ROTT, JOHN M Street Address (P.O. Box Number is Not Acceptable) 8400 BEACON BLVD.. FT. MYERS FL 33907 City 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. I am familiar with, and accept the obligations of registered agent SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. Election Campaign Financing

FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PD TITLE ☐ Delete TITLE Change ☐ Addition ROTT, JOHN M NAME NAME STREET ADDRESS 8400 BEACON BLVD. STREET ADDRESS CITY-ST-7IP FORT MYERS FL 33907 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition DESOUZA, ANJI NAME NAME STREET ADDRESS 203 HENRY AVE. STREET ADDRESS CITY-ST-ZIP LEHIGH ACRES FL 33971 . . CITY-ST-ZIP TD-Delete TITLE Change LANDBO, EVELYN NAME NAME John Campbell STREET ADDRESS 2318 KENT AVE STREET ADDRESS 26390 Sherwood Lane CITY-ST-7IP FT. MYERS FL CITY-ST-ZIP Bonita Springs, FL 34135 TITLE Delete TITLE ☐ Change ☐ Addition BOWKER, DAN NAME NAME 6630 CHIPPER LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NORTH FORT MYERS FL 33903 CITY-ST-ZIP TITLE **X** Delete D ☐ Change X Addition MCKEE, BRIAN NAME NAME Bill Lather STREET ADDRESS 12944 SECOND ST STREET ADDRESS 2281 Crystal Drive CITY-ST-ZIP FORT MYERS FL 33905 CITY-ST-ZIP Fort Myers, FL 33907 ☐ Delete TITLE ☐ Change Addition JACKSON, JERRY NAME

12. I hereby certify that the information supplied with this filling 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.

CITY-ST-ZIP

NAME

STREET ADDRESS

SIGNATURE

2160 TREEHAVEN CIR.

FORT MYERS FL 33907

STREET ADDRESS

(259) 956-5858