

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 APR 10 PM 12:26

DOCUMENT # N05071 (8)

1. Corporation Name

WESLEY COMMUNITY CHURCH, INC.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **09/10/1984** 3a. Date of Last Report **04/04/1994**
4. FEI Number **59-2462989** Applied For ☐
Not Applicable ☐

Principal Place of Business Mailing Address
BRIDGERS AVENUE **BRIDGERS AVENUE**
P. O. BOX 1801 **P. O. BOX 1801**
AUBURNDALE FL 33823 **AUBURNDALE FL 33823**

2. Principal Place of Business 2a. Mailing Address
21 **117 PATTERSON DR** 26 **P. O. Box 1801**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 **AUBURNDALE FL** 27 **Auburndale, FL 33823**
City & State City & State
23 **33823** 28 **FL**
Zip Country Zip Country
24 **33823** 25 **FL** 29 **33823** 30 **FL**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**
6. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution ☐
7. Nonprofit with IRS 601(c)(3) ☒ **\$68.75 Supplemental Fee Not Required**
Tax Exempt Status **61.25**
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
READY, BILLY R, ESQ.
WADDELL AND READY, P.A.
209 PALMETTO ST.
AUBURNDALE FL 33823

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	11. TITLE	☐ Change ☐ Addition	
NAME	12. NAME		
STREET ADDRESS	13. STREET ADDRESS		
CITY - ST - ZIP	14. CITY - ST - ZIP		
TITLE	21. TITLE	☐ Change ☐ Addition	
NAME	22. NAME		
STREET ADDRESS	23. STREET ADDRESS		
CITY - ST - ZIP	24. CITY - ST - ZIP		
TITLE	31. TITLE	☐ Change ☐ Addition	
NAME	32. NAME		
STREET ADDRESS	33. STREET ADDRESS		
CITY - ST - ZIP	34. CITY - ST - ZIP		
TITLE	41. TITLE	☐ Change ☐ Addition	
NAME	42. NAME		
STREET ADDRESS	43. STREET ADDRESS		
CITY - ST - ZIP	44. CITY - ST - ZIP		
TITLE	51. TITLE	☐ Change ☐ Addition	
NAME	52. NAME		
STREET ADDRESS	53. STREET ADDRESS		
CITY - ST - ZIP	54. CITY - ST - ZIP		
TITLE	61. TITLE	☐ Change ☐ Addition	
NAME	62. NAME		
STREET ADDRESS	63. STREET ADDRESS		
CITY - ST - ZIP	64. CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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: **ELIZABETH J. STANLEY** *Elizabeth J. Stanley* 2-20-95 9 65 2731
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR