

FILE NOW: FILING FEE IS \$61.25

FILED
Apr 14 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N05071** (8)

1. Corporation Name

WESLEY COMMUNITY CHURCH, INC.



Principal Place of Business 117 PATTERSON DR P. O. BOX 1801 AUBURNDALE FL 33823 US	Mailing Address P O BOX 1801 P. O. BOX 1801 AUBURNDALE FL 33823-1801 US	3. Date Incorporated or Qualified 09/10/1984	3a. Date of Last Report 03/13/1996
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	4. FEI Number 59-2462989	Applied For ☐ Not Applicable	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No
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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	
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DV ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	STANLEY, GENE E.	1.2 NAME	
STREET ADDRESS	117 PATTERSON DR.	1.3 STREET ADDRESS	
CITY-ST-ZIP	AUBURNDALE FL	1.4 CITY-ST-ZIP	
TITLE	SDT ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	STANLEY, ELIZABETH J.	2.2 NAME	
STREET ADDRESS	117 PATTERSON DR.	2.3 STREET ADDRESS	
CITY-ST-ZIP	AUBURNDALE FL	2.4 CITY-ST-ZIP	
TITLE	PSDT ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	STANLEY, ELIZABETH J.	3.2 NAME	
STREET ADDRESS	117 PATTERSON DR	3.3 STREET ADDRESS	
CITY-ST-ZIP	AUBURNDALE FL	3.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	STANLEY, LINA	4.2 NAME	
STREET ADDRESS	253 WINTER RIDGE BLVD	4.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER HAVEN FL	4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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.

CR2E037 (9/96)