

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N05071

1. Entity Name

WESLEY COMMUNITY CHURCH, INC.

Principal Place of Business

Mailing Address

2010 SPIRIT LAKE RD
WINTER HAVEN FL 33880-1540
US

P O BOX 1801
P. O. BOX 1801
AUBURDALE FL 33823
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2462989

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LANGSTON, SCOTT
117 FLORIDA AVE S
LAKELAND FL 33801

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE C
NAME LAWS, GEORGE W
STREET ADDRESS 2010 SPIRIT LAKE RD
CITY-ST-ZIP WINTER HAVEN FL 33880-1540 ☐ Delete

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

TITLE DT
NAME LAWS, JUDITH B
STREET ADDRESS 2010 SPIRIT LAKE RD
CITY-ST-ZIP WINTER HAVEN FL 33880-1540 ☐ Delete

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

TITLE D
NAME KINSTETTER, DAVID E
STREET ADDRESS 324 SAND PINE TRAIL
CITY-ST-ZIP WINTER HAVEN FL 33880 ☐ Delete

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

TITLE D
NAME STANLEY, LINA
STREET ADDRESS 217 POLK ST W
CITY-ST-ZIP AUBURDALE FL 33823 ☐ Delete

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

TITLE D
NAME TULLY, DAVID M
STREET ADDRESS 2010 SPIRIT LAKE RD
CITY-ST-ZIP WINTER HAVEN FL 33880-1540 ☐ Delete

TITLE D
NAME TULLY, DENNIS M.
STREET ADDRESS 190 OAK AVE. N.
CITY-ST-ZIP BARTOW, FL 33930 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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: GEORGE W. LAWS

5-8-01

863-294-9141

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #