

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20831

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: WESLEY GROUP HOME MINISTRIES, INC.

## Current Principal Place of Business:

JOHNS, JUNE  
400 N 35TH AVE  
HOLLYWOOD, FL 33021 US

## New Principal Place of Business:

616 SW 3RD STREET  
HALLANDALE, FL 33009 US

## Current Mailing Address:

JOHNS, JUNE  
400 N 35TH AVE  
HOLLYWOOD, FL 33021 US

## New Mailing Address:

616 SW 3RD STREET  
HALLANDALE, FL 33009 US

FEI Number: 65-0472571

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JOHNS, JUNE  
121 ISLAND GROVE DR  
MERRITT ISL., FL 32952 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: TEMPLE, ROBERT  
Address: 1902 HIGH VISTA  
City-St-Zip: LAKELAND, FL 338133007

Title: V ( ) Delete  
Name: KUHNEY, KING  
Address: 9121 BAY POINT CR  
City-St-Zip: WEST PALM BEACH, FL 33411

Title: D ( ) Delete  
Name: WINEBRENNER, OPAL  
Address: 5431 NW 167TH ST  
City-St-Zip: OPAL LOCKA, FL 33055

Title: D ( ) Delete  
Name: DIAZ, PEGGY  
Address: 11049 SW 113RD PLACE  
City-St-Zip: MIAMI, FL 331763170

Title: PD ( ) Delete  
Name: JOHNS, JUNE  
Address: 121 ISLAND GROVE DR  
City-St-Zip: MERRITT ISL, FL

Title: D ( ) Delete  
Name: DIAZ, CECILIA  
Address: 1080 DEL LAGO CIRCLE, STE 302  
City-St-Zip: SUNRISE, FL 33313

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: JUNE JOHNS

PD

04/30/2009

Electronic Signature of Signing Officer or Director

Date