

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24022

FILED  
Jan 05, 2009  
Secretary of State

Entity Name: SALEM WESLEYAN CHURCH, INC.

## Current Principal Place of Business:

2764 SALEM CHURCH RD.  
SNEADS, FL 32460 US

## New Principal Place of Business:

## Current Mailing Address:

2764 SALEM CHURCH RD.  
SNEADS, FL 32460 US

## New Mailing Address:

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HOBBS, DIANNE  
7109 HAMILTON RD.  
GRAND RIDGE, FL 32442 US

## Name and Address of New Registered Agent:

SWINNEY, SAMUEL R PASTOR  
2756 SALEM CHURCH ROAD  
SNEADS, FL 32460 US

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: SAMUEL R. SWINNEY

01/05/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: SD ( ) Delete  
Name: HOBBS, DIANE  
Address: 7109 HAMILTON RD.  
City-St-Zip: GRAND RIDGE, FL 32442

Title: VD ( ) Delete  
Name: PEVY, ALAN,  
Address: 7458 HOWELL RD.  
City-St-Zip: SNEADS, FL

Title: P ( ) Delete  
Name: SWINNEY, SAMUEL R  
Address: 2756 SALEM CHURCH ROAD  
City-St-Zip: SNEADS, FL 32460

Title: TD ( ) Delete  
Name: WALDEN, FAYE,  
Address: 1847 GULF POWER RD.  
City-St-Zip: SNEADS, FL

Title: D ( ) Delete  
Name: ALEXANDER, GLENN  
Address: 6261 HWY 90  
City-St-Zip: GRAND RIDGE, FL

Title: D ( ) Delete  
Name: WILLIAMS, KATHY  
Address: 2953 STEPHENS ROAD  
City-St-Zip: GRAND RIDGE, FL 32442

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change ( ) Addition  
Name: GILLEY, CATHERIN  
Address: 7083 HAMILTON RD.  
City-St-Zip: GRAND RIDGE, FL 32442

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: SAMUEL R. SWINNEY

PAST

01/05/2009

Electronic Signature of Signing Officer or Director

Date