

# FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



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

**DOCUMENT # N30865**

**(2)**

1. Corporation Name

**BRADENTON WESLEYAN CHURCH, INC.**



Principal Place of Business

**1938 MANATEE AVE E  
BRADENTON FL 34208**

Mailing Address

**1938 MANATEE AVE E  
BRADENTON FL 34208**

3. Date Incorporated or Qualified  
**02/07/1989**

3a. Date of Last Report  
**05/01/1995**

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

**59-2668252**

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

10. Name and Address of New Registered Agent

**BUCKLES, JAMES, E., REV  
520 20TH ST E  
BRADENTON FL 34208**

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 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 **Rev. James E. Buckles**

Signature, typed or printed name of registered agent and title if applicable

*Rev. James E. Buckles*

(NOTE: Registered Agent signature required when reinstating)

**3/5/96**

Date

12. OFFICERS AND DIRECTORS

TITLE	CD	<input type="checkbox"/> DELETE
NAME	<b>BUCKLES, JAMES E.</b>	
STREET ADDRESS	<b>520 20TH STREET EAST</b>	
CITY - ST - ZIP	<b>BRADENTON FL</b>	
TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	<b>PEVY, LEE</b>	
STREET ADDRESS	<b>5604 21ST ST. CT. S</b>	
CITY - ST - ZIP	<b>BRADENTON FL</b>	
TITLE	D	<input type="checkbox"/> DELETE
NAME	<b>CORMIER, ART</b>	
STREET ADDRESS	<b>5700 BAYSHORE RD., BOX 617</b>	
CITY - ST - ZIP	<b>PALMETTO FL</b>	
TITLE	D	<input type="checkbox"/> DELETE
NAME	<b>LUDWIG, JEAN</b>	
STREET ADDRESS	<b>6925 LINGER LODGE RD.</b>	
CITY - ST - ZIP	<b>BRADENTON FL</b>	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	<b>GIESHOLT, JOYCE</b>	
STREET ADDRESS	<b>3608 14TH ST. W.</b>	
CITY - ST - ZIP	<b>BRADENTON FL</b>	
TITLE	D	<input type="checkbox"/> DELETE
NAME	<b>NUTTLE, GRANT</b>	
STREET ADDRESS	<b>3209 1ST AVE., W</b>	
CITY - ST - ZIP	<b>BRADENTON FL</b>	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92

1.1 TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>SANDY WOOLM</b>	
1.3 STREET ADDRESS	<b>102 47th Ave. Drive West</b>	
1.4 CITY - ST - ZIP	<b>APT. 142 BRADENTON, FL 34207</b>	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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 119.07(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: **Rev. James E. Buckles**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3/5/96**

Date

**1 941 748-1903**

Daytime Phone #

CR2E037 (12/95)