2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Sep 23, 2005
Secretary of State

DOCUMENT# N44908

Entity Name: WESLEY FOUNDATION, FSU, INC.

Current Principal Place of Business:

705 WEST JEFFERSON STREET
TALLAHASSEE, FL 32304

New Principal Place of Business:

Current Mailing Address:

705 WEST JEFFERSON STREET
TALLAHASSEE, FL 32304

New Mailing Address:

FEI Number: 59-3092152 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RAINS, VANCE C REV.
705 WEST JEFFERSON STREET
TALLAHASSEE, FL 32304 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: VANCE C. RAINS
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: FRITCHMAN, WILLIAM P
Address: 880 TAMARACK AVE
City-St-Zip: TALLAHASSEE, FL 32303

Title: VP ( ) Delete
Name: POST, STEVE MR.
Address: 7039 ALHAMBRA DR
City-St-Zip: TALLAHASSEE, FL 32317

Title: S ( ) Delete
Name: HOLLADY, TANYA
Address: 276 STARMOUNT DR
City-St-Zip: TALLAHASSEE, FL 32303

Title: T ( ) Delete
Name: PARRISH, NORMA
Address: 2405 SAN PEDRO
City-St-Zip: TALAHASSEE, FL 32304

Title: D ( ) Delete
Name: VANCE, RAINS
Address: 705 W. JEFFERSON STREET
City-St-Zip: TALLAHASSEE, FL 32304

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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: VANCE C. RAINS REV. 09/23/2005
Electronic Signature of Signing Officer or Director — Date