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904-278-8658

2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

Feb 15, 2001 8:00 am Secretary of State **DOCUMENT # N47757** THE FAITH WESLEYAN CHURCH, INC. 02-15-2001 90047 029 ****61.25 Principal Place of Business Mailing Address 582 PLANTATION DRIVE 582 PLANTATION DRIVE MIDDLEBURG FL 32068-6867 MIDDLEBURG FL 32068-6867 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3024921 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent STEELE, NORMAN G. Street Address (P.O. Box Number is Not Acceptable) 2920 RAVINES ROAD, UNIT 1225 THYER, ROBERT D 2307 KILKENNY CT. MIDDLEBURG MIDDLEBURG FL 32068 Zip Code 32068 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. -17-2001 SIGNATURE 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to FILE NOW: Trust Fund Contribution. **Department of State** FEE IS \$61.25 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. TITLE ☐ Change ☐ Addition TITLE □ Delete LUNDY, JAMES NAME NAME STREET ADDRESS 1182 SURREY GLEN ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIDDLEBURG FL Delete SD ☐ Addition TITLE TITLE ☐ Change JOHNSON, RONALD NAME NAME STREET ADDRESS STREET ADDRESS 1731 HOWARD COURT CITY-ST-ZIP CITY-ST-ZIP **ORANGE PARK FL 32073** TD TITLE ☐ Delete TITLE Change ☐ Addition JOHNSON, GAIL NAME NAME STREET ADDRESS STREET ADDRESS 1731 HOWARD COURT CITY-ST-ZIP CITY-ST-7IP ORANGE PARK FL 32073 D TITLE ☐ Delete TIT! F ☐ Change ☐ Addition POTEAT, GARY NAME NAME STREET ADDRESS P.O. BOX 1618 N/A STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP MIDDLEBURG FL 32068 TITLE ☐ Delete TITLE ☐ Change ☐ Addition WIGGS, RODGER NAMÉ NAME STREET ADDRESS 2716 DENNIS DR. STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP **ORANGE PARK FL** TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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