

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47757

Entity Name: THE FAITH WESLEYAN CHURCH, INC.

FILED
Jan 16, 2004
Secretary of State

Current Principal Place of Business:

582 PLANTATION DRIVE
MIDDLEBURG, FL 320686867

New Principal Place of Business:

Current Mailing Address:

PO BOX 65140
ORANGE PARK, FL 32065

New Mailing Address:

PO BOX 65190
ORANGE PARK, FL 32065

FEI Number: 59-3024921

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALLIFRE, STEPHEN
373 LOS PALMAS DRIVE
ORANGE PARK, FL 32003 US

Name and Address of New Registered Agent:

VALLIERE, STEPHEN
373 LOS PALMAS DRIVE
ORANGE PARK, FL 32003 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: STEPHEN VALLIERE

01/16/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LUNDY, JAMES
Address: 1182 SURREY GLEN ROAD
City-St-Zip: MIDDLEBURG, FL 32068

Title: TD () Delete
Name: COWARD, MIKE
Address: 1304 GROVE PARK DRIVE
City-St-Zip: ORANGE PARK, FL 32073

Title: D () Delete
Name: POTEAT, GARY,
Address: P.O. BOX 1618 N/A
City-St-Zip: MIDDLEBURG, FL 32068

Title: SD () Delete
Name: JOHNSON, GAIL
Address: 1731 HOWARD COURT
City-St-Zip: ORANGE PARK, FL 32073

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:

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: GAIL JOHNSON

SD

01/16/2004

Electronic Signature of Signing Officer or Director

Date