FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 AM 9:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N92000000982 (0)**

1. Corporation Name

WESLEY GROUP HOME MINISTRIES OF JACKSONVILLE, INC.

Principal Place of Business	Mailing Address
1415 LA SALLE STREET JACKSONVILLE FL 32207-3196	1415 LA SALLE STREET JACKSONVILLE FL 32207-3196

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **12/23/1992**
3a. Date of Last Report: **05/01/1994**
4. FEI Number: **59-6045472** ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc 22	Suite, Apt. #, etc 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

RIDDLE, BARBARA W
1415 LA SALLE STREET
JACKSONVILLE FL 32207-3113

10. Name and Address of New Registered Agent

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ (Typed or Printed Name of Registered Agent and Title if Applicable) (Must Be Registered Agent's Signature Required When Changed) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	S	11 TITLE	☐ Change ☐ Addition
NAME	STANDIFER, LINDA C.	12 NAME	
STREET ADDRESS	226 NORTH LAURA ST	13 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	14 CITY-ST-ZIP	
TITLE	T	21 TITLE	☐ Change ☐ Addition
NAME	HENNING, PATRICIA A.	22 NAME	
STREET ADDRESS	2103 SANDPIPER CT	23 STREET ADDRESS	
CITY-ST-ZIP	PONTE BEDRA BCH FL	24 CITY-ST-ZIP	
TITLE	D	31 TITLE	X ☐ Change ☐ Addition
NAME	RIDDLE, BARBARA W	32 NAME	Burma Davis
STREET ADDRESS	1415 LA SALLE STREET	33 STREET ADDRESS	8694 San Servera Dr., West
CITY-ST-ZIP	JACKSONVILLE FL 32207	34 CITY-ST-ZIP	Jacksonville, FL 32217
TITLE	P	41 TITLE	P/D ☒ Change ☐ Addition
NAME	SMITH, STEVEN R	42 NAME	
STREET ADDRESS	4012 ORTEGA FOREST DRIVE	43 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	44 CITY-ST-ZIP	
TITLE	D	51 TITLE	☒ Change ☐ Addition
NAME	SMITH, SIMON A	52 NAME	Emily Ann Zimmerman
STREET ADDRESS	5922 WINDSOR DRIVE	53 STREET ADDRESS	7204 San Carlos Road
CITY-ST-ZIP	JACKSONVILLE FL 32210	54 CITY-ST-ZIP	Jacksonville, FL 32217
TITLE	D	61 TITLE	☐ Change ☐ Addition
NAME	MASSEY, MARY A.	62 NAME	
STREET ADDRESS	6750 EPPING FOREST WAY, #106	63 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	64 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)(i), 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 above, or on an attachment with an address.

SIGNATURE: Patricia A. Henning (964) 3%-3426
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
PATRICIA A. HENNING
4-26-95
Date
Telephone Number

0025095