

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N92000000982 (0)

1. Corporation Name

WESLEY GROUP HOME MINISTRIES OF JACKSONVILLE, IN C.



Principal Place of Business

Mailing Address

**1415 LA SALLE STREET
JACKSONVILLE FL 32207-3196**

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JACKSONVILLE FL 32207-3196**

3. Date Incorporated or Qualified
12/23/1992

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

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**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

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

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

(NOTE: Registered Agent signature is not required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12

TITLE ☐ DELETE
NAME **S**
STREET ADDRESS **STANDIFER, LINDA C.**
CITY-STATE-ZIP **226 NORTH LAURA ST
JACKSONVILLE FL**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-STATE-ZIP

TITLE ☒ DELETE
NAME **T**
STREET ADDRESS **HENNING, PATRICIA A.**
CITY-STATE-ZIP **2103 SANDPIPER CT
PONTE BEDRA BCH FL**

2.1 TITLE ☐ Change ☒ Addition
2.2 NAME **T**
2.3 STREET ADDRESS **Hastings, David C.**
2.4 CITY-STATE-ZIP **1415 LaSalle Street
Jacksonville, FL 32207**

TITLE ☒ DELETE
NAME **D**
STREET ADDRESS **DAVIS, BURMA**
CITY-STATE-ZIP **8694 SAN SERVERA DRIVE, WEST
JACKSONVILLE FL**

3.1 TITLE ☐ Change ☒ Addition
3.2 NAME **D**
3.3 STREET ADDRESS **Preston, Ed**
3.4 CITY-STATE-ZIP **4717 Empire Avenue
Jacksonville, FL 32207**

TITLE ☒ DELETE
NAME **PD**
STREET ADDRESS **SMITH, STEVEN R**
CITY-STATE-ZIP **4012 ORTEGA FOREST DRIVE
JACKSONVILLE FL**

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME **PD**
4.3 STREET ADDRESS **Riddle, Barbara**
4.4 CITY-STATE-ZIP **1415 LaSalle Street
Jacksonville, FL 32207**

TITLE ☒ DELETE
NAME **D**
STREET ADDRESS **ZIMMERMAN, EMILY A**
CITY-STATE-ZIP **7204 SAN CARLOS ROAD
JACKSONVILLE FL**

5.1 TITLE ☐ Change ☒ Addition
5.2 NAME **D**
5.3 STREET ADDRESS **Queener, Charles**
5.4 CITY-STATE-ZIP **11635 Sherborne Cir. N.
Jacksonville, FL 32225**

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **MASSEY, MARY A.**
CITY-STATE-ZIP **6750 EPPING FOREST WAY, #106
JACKSONVILLE FL**

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

27 Mar, 1996 (904) 396-3026
Date Date/Time Phone #

CR2E037 (12/95)