

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 03 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA 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 32207-31961415 LA SALLE STREET  
JACKSONVILLE FL 32207-31133. Date Incorporated or Qualified  
12/23/19923a. Date of Last Report  
04/02/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City &amp; State

City &amp; State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-6045472

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution\$5.00 May Be  
Added to Fees8. 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

Hill, Teresa L.

82 Street Address (P.O. Box Number is Not Acceptable)

1415 LaSalle Street

83

84 City

Jacksonville

FL

85 Zip Code  
32207

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

Teresa L. Hill

22 Jan 1997

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE S ☐ DELETE  
NAME STANDIFER, LINDA C.  
STREET ADDRESS 226 NORTH LAURA ST  
CITY-ST-ZIP JACKSONVILLE FL1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIPTITLE T ☐ DELETE  
NAME HASTINGS, DAVID C  
STREET ADDRESS 1415 LASALLE STREET  
CITY-ST-ZIP JACKSONVILLE FL2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIPTITLE D ☐ DELETE  
NAME PRESTON, ED  
STREET ADDRESS 4717 EMPIRE AVE  
CITY-ST-ZIP JACKSONVILLE FL3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIPTITLE PD ☒ DELETE  
NAME RIDDLE, BARBARA  
STREET ADDRESS 1415 LASALLE STREET  
CITY-ST-ZIP JACKSONVILLE FL4.1 TITLE ☐ Change ☒ Addition  
4.2 NAME PD  
4.3 STREET ADDRESS Hill, Teresa L.  
4.4 CITY-ST-ZIP 1415 LaSalle Street  
Jacksonville, FL 32207TITLE D ☐ DELETE  
NAME QUEENER, CHARLES  
STREET ADDRESS 11635 SHERBORNE CIR N  
CITY-ST-ZIP JACKSONVILLE FL5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIPTITLE D ☐ DELETE  
NAME MASSEY, MARY A.  
STREET ADDRESS 6750 EPPING FOREST WAY, #106  
CITY-ST-ZIP JACKSONVILLE FL6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 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.

Teresa L. Hill

SIGNATURE:

Teresa L. Hill

1/9/97 (904) 396-3026

Daytime Phone #0004860

CR2E037 (9/96)