## 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N97000003037

Apr 08, 2009 Secretary of State

Entity Name: WESLEY MEMORIAL UNITED METHODIST CHURCH OF LAKELAND, INCORPORATED

Current Principal Place of Business: New Principal Place of Business:

719 N. MASSACHUSETTS AVE. LAKELAND, FL 338011746

Current Mailing Address: New Mailing Address:

719 N. MASSACHUSETTS AVE. LAKELAND, FL 338011746

FEI Number: 59-0774207 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DRY, JAMES

604 LAUREL LN

LAKELAND, FL 33813 US

MCLELLAND, GWEN

422 EL SALVADOR DRIVE

LAKELAND, FL 33809 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: GWEN MCLELLAND 04/08/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete DRY, JAMES MCLELLAND, GWEN Name: Name: 604 LAUREL LN Address: 422 EL SALVADOR DRIVE Address: City-St-Zip: LAKELAND, FL 33813 City-St-Zip: LAKELAND, FL 33809 Title: Title: (X) Change ( ) Addition ( ) Delete HARWELL, D.K. Name: WEBB, JACKIE Name:

 Address:
 1046 LAKESHORE DR
 Address:
 2130 SAXON DRIVE

 City-St-Zip:
 LAKELAND, FL 33805
 City-St-Zip:
 LAKELAND, FL 33810

 Title:
 T () Delete
 Title:
 T (X) Change () Addition

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Title: T ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 JACKSON, DORIS
 Name:

 Address:
 3057 JUNCTION CIR
 Address:

 City-St-Zip:
 LAKELAND, FL 338055201
 City-St-Zip:

 Name:
 SUMMERLIN, BEN
 Name:
 WEBB, BILL

 Address:
 1323 EDGEWATER BEACH DRIVE
 Address:
 2130 SAXON LANE

 City-St-Zip:
 LAKELAND, FL 33805
 City-St-Zip:
 LAKELAND, FL 33810

Title: T (X) Delete Title: ( ) Change ( ) Addition

 Name:
 WEBB, BILL
 Name:

 Address:
 2130 SAXON LANE
 Address:

 City-St-Zip:
 LAKELAND, FL 33810
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: GWEN MCLELLAND C 04/08/2009