

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707961

FILED
Feb 20, 2015
Secretary of State
CC2558906860

Entity Name: EBENEZER WESLEYAN METHODIST CHURCH, INC.

Current Principal Place of Business:

201 S.W. 6TH AVE.
DELRAY BEACH, FL 33444-2537

Current Mailing Address:

201 S.W. 6TH AVE.
DELRAY BEACH, FL 33444-2537

FEI Number: 59-2544866

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SPELLS, VETA M
201 S.W. 6TH AVE.
DELRAY BEACH, FL 33444-2537 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: VETA M SPELLS

02/20/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIR
Name BROWN, WITHLEAN
Address 812 SW 3RD ST.
City-State-Zip: DELRAY BEACH FL 33444

Title VP
Name ROKER, MARLENA
Address 802 N.E. SECOND CT.
City-State-Zip: BONYTON BEACH FL 33435

Title SECRETARY
Name SPELLS, VETA
Address 580 N W 4TH ST
City-State-Zip: DELRAY BEACH FL 33444

Title TREASURER
Name EVANS, MARY A.
Address 205 SW 6TH AVENUE
City-State-Zip: DELRAY BEACH FL 33444

Title DIR
Name JACKSON, YVETTE
Address 42 NW 11TH AVE
City-State-Zip: DELRAY BEACH FL 33444

Title DIR
Name BROWN, CEPHAS W
Address 812 S W 3RD ST
City-State-Zip: DELRAY BEACH FL 33444

Title PRESIDENT
Name FUNCHES, EDWARD J SR.
Address 380 N W 17TH AVE
City-State-Zip: BOYNTON BEACH FL 33435

Title DIRECTOR
Name BONIMY, JUDY
Address 329 NW 4TH AVE
City-State-Zip: DELRAY BEACH FL

I hereby 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 all other like empowered.

SIGNATURE: VETA M SPELLS

SECRETARY

02/20/2015

Electronic Signature of Signing Officer/Director Detail

Date