FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 23, 1999 8:00 am
Secretary of State
03-23-1999 90043 014 ****61.25

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DOCUMENT # N08684

1. Corporation Name
EPIPHANY HOUSING, INC.

Principal Place of Business	Mailing Address
4792 S. RIDGEWOOD AVE. PORT ORANGE FL 32127	4792 S. RIDGEWOOD AVE. PORT ORANGE FL 32127

2. Principal Place of Business (21) — Suite, Apt. #, etc. (22) — City & State (23) — Zip (24) — Country (25)

2a. Mailing Address (26) — Suite, Apt. #, etc. (27) — City & State (28) — Zip (29) — Country (30)

3. Date Incorporated or Qualifed: 04/10/1985

4. FEI Number: 59-2866289 ☐ Applied For ☐ Not Applicable

5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

CHADWICK, JAMES M
11300 FOURTH STREET NORTH
SUITE 200
ST PETERSBURG FL 33716

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 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	BENGE, JACK WILLIAM		1.2 NAME		
STREET ADDRESS	3461 MARTINGALE CT		1.3 STREET ADDRESS		
CITY-ST-ZIP	PORT ORANGE FL		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	QUARTIER, DAVID S		2.2 NAME		
STREET ADDRESS	752 RENEGADE LANE		2.3 STREET ADDRESS		
CITY-ST-ZIP	PT ORANGE FL		2.4 CITY-ST-ZIP		
TITLE	PD	☐ DELETE	3.1 TITLE		☑ Change ☐ Addition
NAME	ZIMMERMAN, FRANK W		3.2 NAME		
STREET ADDRESS	~~209 LONDON PL~~		3.3 STREET ADDRESS	1025 Eagle Lake Trail #706	
CITY-ST-ZIP	~~PORT ORANGE FL 32127~~		3.4 CITY-ST-ZIP	Port Orange, FL 32119	
TITLE	TD	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	HALL, CAROL		4.2 NAME		
STREET ADDRESS	2127 S. PALMETTO AVE.		4.3 STREET ADDRESS		
CITY-ST-ZIP	SOUTH DAYTONA FL		4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	KAMIDE, PAUL T		5.2 NAME		
STREET ADDRESS	201 LAFAYETTE ST		5.3 STREET ADDRESS		
CITY-ST-ZIP	PORT ORANGE FL		5.4 CITY-ST-ZIP		
TITLE	VPD	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	GILPATRICK, DIANE		6.2 NAME		
STREET ADDRESS	878 LEMON RD		6.3 STREET ADDRESS		
CITY-ST-ZIP	S DAYTONA FL 32119		6.4 CITY-ST-ZIP		

14. I 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, with all other like empowered.

SIGNATURE: Frank W. Zimmerman SIGNATURE REQUIRED 1/22/99 (904) 767-6011
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Frank W. Zimmerman, President

CR2E037 (11/98)

254237-90043-14

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12. **OFFICERS AND DIRECTORS (con't)**

D
Mason, Elmer
2318 Oriole Lane
So. Daytona, FL 32119

D
McCollum, Agnes D.
4030 Oriole Avenue
Daytona Beach, FL 32127

S/D
Palmer, Dorthea B.
1261 Plantation Place
Daytona Beach, FL 32119