

1-30-95 B-600-XC
FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
 ANNUAL REPORT
 1995**



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

**FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS**

95 JAN 30 AM 9: 35

DOCUMENT # 743151 (3)
 1. Corporation Name
EPWORTH VILLAGE, INC.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/07/1978	3a. Date of Last Report 02/02/1994
4. FEI Number 59-0589990	Applied For ☐ Not Applicable ☐
5. Certificate of Status Desired ☒	\$6.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Country 29	Zip 30

9. Name and Address of Current Registered Agent

**MARCH DONALD F.
 7515 S.W. 31 STREET
 MIAMI FL 33155**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SD	1.1 TITLE	S/D ☒ Change ☐ Addition
NAME	MOTTERN, NANCY	1.2 NAME	Paula S. Massey
STREET ADDRESS	8041 SW 139 TERR	1.3 STREET ADDRESS	6501 Leonardo St.
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	Coral Gables, FL 33146
TITLE	VD	2.1 TITLE	V/D ☒ Change ☐ Addition
NAME	BINKLEY, WILLIAM E	2.2 NAME	Charles Vones, Sr.
STREET ADDRESS	1821 NW 98 TR #1	2.3 STREET ADDRESS	1581 Golfview Dr., E.
CITY-ST-ZIP	PEMBROKE PINES FL	2.4 CITY-ST-ZIP	Pembroke Pines, FL 33026
TITLE	VD	3.1 TITLE	V/D ☒ Change ☐ Addition
NAME	HARWELL, W. H. J	3.2 NAME	Christina M. Eve.
STREET ADDRESS	1000 QUAYSIDE TERR., #801	3.3 STREET ADDRESS	586 N.W. 48 St.
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	Miami, FL 33127-2747
TITLE	TD	4.1 TITLE	T/D ☒ Change ☐ Addition
NAME	TWITCHELL, ALMA	4.2 NAME	George R. Van Wyck
STREET ADDRESS	971 N.E. 115TH STREET	4.3 STREET ADDRESS	8455 S.W. 44th St.
CITY-ST-ZIP	MIAMI FL	4.4 CITY-ST-ZIP	Miami, FL 33155
TITLE	PD	5.1 TITLE	P/D ☒ Change ☐ Addition
NAME	BROCK, JAMES E.	5.2 NAME	William Jacobs
STREET ADDRESS	850 ANASTASIA	5.3 STREET ADDRESS	10615 S.W. 96th Terr.
CITY-ST-ZIP	CORAL GABLES FL	5.4 CITY-ST-ZIP	Miami, FL 33176
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	KATSANIS, THOMAS, A	6.2 NAME	
STREET ADDRESS	5300 W 16 AVE #111	6.3 STREET ADDRESS	
CITY-ST-ZIP	HIALEAH FL	6.4 CITY-ST-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 118.07(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:

Thomas A. Katsanis
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Thomas A. Katsanis

1/17/95 (305) 556-3500

Date Daytime Phone #