

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000007927

**Entity Name:** EVERGLADES COMMUNITY CHURCH, A UNITED METHODIST CONGREGATION, INC.**FILED**  
**Apr 14, 2015**  
**Secretary of State**  
**CC3346244014****Current Principal Place of Business:**20871 JOHNSON STREET  
SUITE 101  
PEMBROKE PINES, FL 33029**Current Mailing Address:**20871 JOHNSON STREET  
SUITE 101  
PEMBROKE PINES, FL 33029**FEI Number: 65-0701099****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**JONES, PATRIC LESQ  
300 S.E. 19TH STREET  
FORT LAUDERDALE, FL 33316 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	TRUSTEE
Name	WILLIAMS, MATTHEW
Address	20871 JOHNSON STREET, SUITE 101
City-State-Zip:	PEMBROKE PINES FL 33029

Title	TRUSTEE
Name	RIVERA, JOHN
Address	20871 JOHNSON STREET, SUITE 101
City-State-Zip:	PEMBROKE PINES FL 33029

Title	TRUSTEE
Name	ADLER, DEAN
Address	20871 JOHNSON STREET, SUITE 101
City-State-Zip:	PEMBROKE PINES FL 33029

Title	SECRETARY
Name	PERALTA, VALERIE
Address	20871 JOHNSON STREET, SUITE 101
City-State-Zip:	PEMBROKE PINES FL 33029

Title	TRUSTEE
Name	DESTEFANO, ALISON
Address	20871 JOHNSON STREET, SUITE 101
City-State-Zip:	PEMBROKE PINES FL 33029

Title	TRUSTEE
Name	FARMIN, BILL
Address	20871 JOHNSON STREET, SUITE 101
City-State-Zip:	PEMBROKE PINES FL 33029

*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: VALERIE PERALTA****SECRETARY****04/14/2015**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date