## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010371

Entity Name: DIVINE EPIPHANY INC.

**Current Principal Place of Business:** 

3724 EASY STREET

PORT CHARLOTTE. FL 33952

**Current Mailing Address:** 

34 HICKORY TRACE CIRCLE

35

SWAINSBORO, GA 30401 US

FEI Number: 26-3928641 Certificate of Status Desired: No.

Name and Address of Current Registered Agent:

DAVIS, ONDRAYA L PRESIDENT 3724 EASY STREET PORT CHARLOTTE, FL 33952 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: ONDRAYA LANETTE DAVIS 01/14/2024

Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PRESIDENT** Title **BOARD MEMBER** Name DAVIS, ONDRAYA LANETTE Name BENNETT, ELLEN M Address 3724 EASY STREET Address 3724 EASY STREET

City-State-Zip: PORT CHARLOTTE FL 33952 City-State-Zip: PORT CHARLOTTE FL 33952

Title **TREASURER** Title **BOARD MEMBER** 

Name WALDEN, MAURICESHA JONES, DEONDREIA J Name

**ONDRANETTE** 

3372 SR-207 Address City-State-Zip: VIDALIA GA 30474

City-State-Zip: ELKTON FL

Title VΡ

Address

Title **BOARD MEMBER** Name MCDONALD, JOSEFINA GILLIS, APRIL Name 4214 CAPULET LANE APARTMENT Address

Address 905 GREEN ST.

612 WARD ST.

City-State-Zip: VIDALIA GA 30474 FORT MYERS FL 33916 City-State-Zip:

Title **BOARD MEMBER** Title ASST. TREASURER Name JONES, TRENTON JONES, TEVIN M Name

Address 206 SOUTH SMALLEY DRIVE Address 315 NORTH GREEN ST.

VIDALIA GA 30474 City-State-Zip: SWAINSBORO GA 30401 City-State-Zip:

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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: ONDRAYA LANETTE DAVIS PRESIDENT?OWNER

Electronic Signature of Signing Officer/Director Detail

01/14/2024 Date

**FILED** Jan 14, 2024

**Secretary of State** 

9555196707CC

Date

## Officer/Director Detail Continued:

Title BOARD MEMBER, EXECUTIVE SECRETARY Title SECRETARY

Name WALDEN, MAURIEKA JACOLE Name ELLIOTT, STEPHANIE

Address PSC 400 BOX #4745 Address 330 LAVERNE ST.

City-State-Zip: APO OC 96273 City-State-Zip: PUNTA GORDA FL 33980