

2005 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Sep 09, 2005 8:00 am**  
**Secretary of State**

09-09-2005 90032 033 \*\*\*\*70.00

DOCUMENT # N01000008803

1. Entity Name  
EPWORTH VILLAGE CHAPEL, INC.



Principal Place of Business  
5300 W 16 AVE  
HIALEAH, FL 33012

Mailing Address  
5300 W 16 AVE  
HIALEAH, FL 33012

50066083



**DO NOT WRITE IN THIS SPACE**

09012005 No Chg-NP

CR2E037 (10/03)

4. FEI Number  
80-0004704

Applied For  
Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

CHAPLAIN, LAWRENCE M  
5300 W 16 AVE  
HIALEAH, FL 33012

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25  
Due by September 7, 2005

9. Election Campaign Financing  
Trust Fund Contribution.

☐ **\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	HUTSON, JAMES J
STREET ADDRESS	5300 W 16 AVE
CITY-ST-ZIP	HIALEAH, FL 33012
TITLE	SD
NAME	DIAZ, CECELIA J
STREET ADDRESS	620 SW 7 AVE
CITY-ST-ZIP	HALLANDALE BEACH, FL 33009
TITLE	D
NAME	TEAGUE, JOE
STREET ADDRESS	165 SHORE DRIVE
CITY-ST-ZIP	MIAMI, FL 33133
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Cecelia Diaz*  
Cecelia Diaz

8/30/05 305-  
556-3500 X6