


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 25, 2008 08:00 AM
Secretary of State

DOCUMENT # N06000009364 1. Entity Name EPIPHANY ANGLICAN CHURCH, INC.	
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Principal Place of Business 28944 HUBBARD ST #86 LEESBURG, FL 34748	Mailing Address 28944 HUBBARD ST #86 LEESBURG, FL 34748
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DO NOT WRITE IN THIS SPACE



02202008 No Chg-NP CR2E037 (4/06)

4. FEI Number 41-2212535	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

UNDERWOOD, HOWARD P
28944 HUBBARD ST #86
LEESBURG, FL 34748

**DO NOT WRITE
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP UNDERWOOD, HOWARD P 28944 HUBBARD ST #86 LEESBURG, FL 34748
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV POTTER, WILLIAM F 652 HICKORY HILL LADY LAKE, FL 32159
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DST UNDERWOOD, SUSAN D 28944 HUBBARD ST #86 LEESBURG, FL 34748
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03/05/08-80001-025 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Susan D Underwood 2/21/08 352 728-2505
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

SUSAN D UNDERWOOD