## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # N96000006522



**FILED** Feb 15, 2006 8:00 am Secretary of State 02-15-2006 90033 004 \*\*\*\*61.25

| 1. Entity Nam<br>EPIPHAN  |  |   | ·   | o <b>2 1</b> 3 <b>2</b> 000                        | , , 00, 55                              | . 0.  | 29               |   |                       |  |
|---|--|---|---|--|---|---|------------------|---|-----------------------|--|
| 2508 E HANNA AVE<br>Tampa, Fl. 33610-1366                       |  | Mailing Address<br>11300 4TH STREET N<br>STE 200<br>SAINT PETERSBURG, FL 33716-2940 |   |  |   |   |                  | (0) <b>0</b> ) (0)                        |                       |  |
| 2. Principal Place of Business 3. N                             |  | Mailing Address   |   |  |   |   |                  |   |                       |  |
| Suite, Apt. #, etc.   |  | Suite, Apt. #, etc.   |   |  | 01252006                                | Chg-NP  | CR2E037          | (11/05)                                   |                       |  |
| City & State  | 3  | City & State  |   |  | 50 245245                               |   |                  | plied For<br>t Applicable                 |                       |  |
| Zip   | Country  | Zip   | Country   |  | 5. Certificate of S                     | Status Desired  |                  | B.75 Add<br>e Required                    |                       |  |
|   | 6. Name and Address of Current Re  | gistered Agent  | Agont   |  |   | 7. Name and Address of New Registered Agent                                   |                  |   |                       |  |
| DIVITO IC   | SEBL A ESO   |   | Name  | Name   |   |   |                  |   |                       |  |
| DIVITO, JOSEPH A ESQ. DIVITO & HIGHAM, P.A. 4514 CENTRAL AVENUE |  |   |   | Street Address (P.O. Box Number is Not Acceptable) |   |   |                  |   |                       |  |
| ST. PETER   | RSBURG, FL 33711   |   |   |  |   |   |                  |   |                       |  |
|   |  |   | City  |  | ,                                       |   | FL               | Zip Code                                  | •                     |  |
|   | named entity submits this statement for the ions of registered agent.  | he purpose of changing its re   | gistered office or                                  | registere  | ed agent, or both, i                    | n the State of F  | lorida. I am far | niliar with,                              | and accept            |  |
| SIGNATURE   | Signature, typed or printed name of registered agent and   | title # applicable. Log Cara (NOTE: F   | Registered Agent signatu                            | i' ('  | garder (Jarder Min<br>when reinstating) | n (, sout   | phobac ser       | ्राच्या क्षात्र है।<br>संस्था क्षात्र है। | Pontalen<br>Strien of |  |
|   |  |   | Election Campaign Financing Trust Fund Contribution |  |   | \$5.00 May Be Make check payable to Added to Fees Florida Department of State |                  |   |                       |  |
| 10.   | OFFICERS AND DIRE  | CTORS : 1   | 11.   | A  | ADDITIONS/CHANG                         | GES TO OFFICE   | ERS AND DIRE     | CTORS IN                                  | 10" eV 2              |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP                           | D  | Oelete  | TITLE NAME STREET ADDRESS CITY-ST-ZIP               | ••   |   | ·   | · · · · · [      | _ Change                                  | Addition              |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP                           | SD<br>CANNIFF, CHUCK<br>308 W. HENRY STREET<br>TAMPA, FL   | ☐ Delete  | TITLE NAME STREET ADDRESS CITY-ST-ZIP               | VPD  |   |   | X                | <b>X</b> Change                           | Addition              |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP                           | TD<br>CORSETTI, JOSEPH<br>THE CHANCERY, 6363 9TH AVE.<br>ST. PETERSBURG, FL 33710  | ☐ Delete  | TITLE NAME STREET ADDRESS CITY-ST-ZIP               |  |   |   | [                | Change                                    | ☐ Addition            |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP                           | PD<br>MINERVINI, MARIE T<br>1219 E. FLORA STREET<br>TAMPA, FL  | ☐ Delete  | TITLE NAME STREET ADDRESS CITY-ST-ZIP               |  |   |   | [                | Change                                    | Addition              |  |
| TIFLE NAME  | ASD.<br>SIMMS, GLORIA  | ☐ Delete  | TITLE<br>NAME<br>STREET ADDRESS                     | SD   |   |   | χ                | <b>X</b> Change                           | ☐ Addition            |  |
| STREET ADORESS<br>CITY-ST-ZIP                                   | 2934 ANGELA CT.<br>TAMPA, FL   | <u> </u>  | CITY-ST-ZIP   |  |   |   | -                | ٠,  |                       |  |
| TITLE   | The second state of the second | Delete  | TITLE   | TD -::==   | T P. KONT.                              | 1.1751/2.1.   | G. 25:50.        | Change                                    | J 🔯 Addition          |  |
| NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                           | - 14 45 6 13 100<br>- 14 45 6 13 100<br>- 15 16 16 16 17 18  | 3. Elantim Camp<br>7 - Fundum   | NAME<br>STREET ADDRESS                              | Norv   | ril, Claud<br>5 E. MLK B<br>5 FL 336    | e   | wou neutilii     |   | 526                   |  |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 19, 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 il changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mules Mules of SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR M. Therese Minervini, President

Jul 1, 2006 (813) 237-8515.

4TTACHMENT
60015873
11 N9600006500

## 2006 Uniform Business Report—cont.

| 10. | Officers and Directors | 11. Additions/ Changes to Officers and Directors in 10 |  |  |  |  |
|-----|------------------------|--|--|--|--|--|
|     | □ Delete               | D □ Change ☑ Addition                                  |  |  |  |  |
|     |                        | Thomas, Everett A.                                     |  |  |  |  |
|     |                        | 4503 Dolphin Drive                                     |  |  |  |  |
|     |                        | Tampa, FL 33617-8408                                   |  |  |  |  |
|     |                        |  |  |  |  |  |