

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 22, 2008 8:00 am**  
**Secretary of State**

02-22-2008 90013 012 \*\*\*\*61.25

**DOCUMENT # N96000006522**

1. Entity Name  
**EPIPHANY HOUSING OF TAMPA, INC.**



Principal Place of Business  
**2508 E HANNA AVE  
TAMPA, FL 33610-1366**

Mailing Address  
**11300 4TH STREET N  
STE 200  
SAINT PETERSBURG, FL 33716-2940**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01252008

Chg-NP

CR2E037 (12/06)

4. FEI Number  
**59-3468445**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DIVITO, JOSEPH A ESQ.  
DIVITO & HIGHAM, P.A.  
4514 CENTRAL AVENUE  
ST. PETERSBURG, FL 33711**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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 May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete  
NAME **NGUYEN, TUOC NGOC**  
STREET ADDRESS **2510 E. HANNA AVE.**  
CITY-ST-ZIP **TAMPA, FL**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **VPD** ☐ Delete  
NAME **CANNIFF, CHUCK**  
STREET ADDRESS **308 W. HENRY STREET**  
CITY-ST-ZIP **TAMPA, FL**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **TD** ☒ Delete  
NAME **CORSETTI, JOSEPH**  
STREET ADDRESS **THE CHANCERY, 6363 9TH AVE. NORTH**  
CITY-ST-ZIP **ST. PETERSBURG, FL 33710**

TITLE **Ass't T** ☒ Change ☐ Addition  
NAME **Ward, Paul**  
STREET ADDRESS **6363 9th Ave N**  
CITY-ST-ZIP **St. Petersburg, FL 33710**

TITLE **PD** ☐ Delete  
NAME **MINERVINI, MARIE T**  
STREET ADDRESS **1219 E. FLORA STREET**  
CITY-ST-ZIP **TAMPA, FL**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **SD** ☐ Delete  
NAME **SIMMS, GLORIA**  
STREET ADDRESS **2934 ANGELA CT.**  
CITY-ST-ZIP **TAMPA, FL**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D** ☐ Delete  
NAME **NORVIL, CLAUDE**  
STREET ADDRESS **1305 E MLK BLVD**  
CITY-ST-ZIP **TAMPA, FL 336034418**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:**

*Marie T Minervini*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**M. Therese Minervini**

**(727) 578-1174**

Date

Daytime Phone #

# ATTACHMENT

2008 Uniform Business Report—cont.

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# 19600006522

10. Officers and Directors	11. Additions/ Changes to Officers and Directors in 10
D <input type="checkbox"/> Delete Thomas, Everett A. 4503 Dolphin Drive Tampa, FL 33617-8408	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
D <input type="checkbox"/> Delete Cox, Richard T. 1515 E. Bougainvillea Avenue Tampa, FL 33612	<input type="checkbox"/> Change <input type="checkbox"/> Addition
D <input type="checkbox"/> Delete Malowney, Jacqueline Victor 6467 Theresa Avenue Weeki Wachee, FL 34607	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	DT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Lindsay, Margaret 16110 Linsford Oak Blvd. Tampa, FL 33624