

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 704203

**Entity Name:** THE EPISCOPAL CHURCH OF THE HOLY FAMILY,  
INCORPORATED

**FILED**  
**Mar 31, 2017**  
**Secretary of State**  
**CC3821241705**

**Current Principal Place of Business:**

18501 N.W. 7TH AVE.  
MIAMI GARDENS, FL 33169

**Current Mailing Address:**

18501 N.W. 7TH AVE.  
MIAMI GARDENS, FL 33169 US

**FEI Number: 59-0936172**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

THE VERY, REV. HORACE DWARD  
13202 NW 11TH ST.  
PEMBROKE PINES, FL 33028 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title T  
Name CAMPBELL, MAUREEN E DR.  
Address 11981 NW 11 STREET  
City-State-Zip: PEMBROKE PINES FL 33026

Title DIRECTOR  
Name WHITELY GORDON, TEREAKA  
Address 727 NE 193 STREET  
City-State-Zip: MIAMI FL 33179

Title C, M, S  
Name THE VERY, REV. HORACE DWARD  
Address 13202 NW 11TH ST.  
City-State-Zip: PEMBROKE PINES FL 33028

Title DIRECTOR  
Name FINDLAY, BEVERLEY  
Address 401 NW 185 TERRACE  
City-State-Zip: MIAMI GARDENS FL 33169

*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: MAUREEN E. CAMPBELL**

**TREASURER**

**03/31/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date