

**2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000002395

**Entity Name:** ETERNAL HOME AND WECARE OUTREACH MINISTRY, INC.**Current Principal Place of Business:**4231 DESOTO AVENUE  
FORT MYERS, FL 33905-3811**Current Mailing Address:**4231 DESOTO AVENUE  
FORT MYERS, FL 33905-3811 US**FEI Number:** 64-1485045**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**TAYLOR, HILLEARY S  
4255 DESOTO AVE  
APT C  
FORT MYERS, FL 33905-3811 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:** HILLEARY TAYLOR

04/28/2025

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VD  
Name JOHNSON, TANYA  
Address 122 NW 7TH TERR  
City-State-Zip: CAPE CORAL FL 33993

Title DIRECTOR  
Name JOHNSON, STEVEN  
Address 1234 SOUTH 31 STREET  
City-State-Zip: PHILADELPHIA PA 19142

Title ST, OIC, DIRECTOR  
Name SANTIAGO, TERRELLE JULIO  
Address 4231 DESOTO AVE  
City-State-Zip: FORT MYERS FL 33905

Title DIRECTOR  
Name EPPS, NICHOLAS  
Address 1234 S.31 STREET  
City-State-Zip: PHILADELPHIA PA 19142

Title SUPPORTIVE HOUSING DIRECTOR  
Name TAYLOR, SCOTT  
Address 4231 DESOTO AVENUE  
City-State-Zip: FORT MYERS FL 33905-3811

Title DEACON  
Name DUCLONA, FORTILUS  
Address 4231 DESOTO AVE  
City-State-Zip: FORT MYERS FL 33905

Title SERVICE DIRECTOR, OIC, /WCO  
Name RICKMAN, ERIC  
Address 3730 CENTRAL AVE  
APT 123  
City-State-Zip: FORT MYERS FL 33901

Title SUPPORT STAFF  
Name RICKMAN, JOANN  
Address 3730 CENTRAL AVE  
City-State-Zip: FORT MYERS FL 33901

**Continues on page 2**

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:** HILLEARY SCOTT TAYLORHTTP://WECAREFORTMY 04/28/2025  
ERS.ORG

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title                PRESIDENT  
Name                QUARTEY, TAMIKA  
Address             RESIDECE DE JULIE  
                          ROUTE DE MOLINI  
City-State-Zip:    ALBITRECCIA   20166

Title                DEACONESS  
Name                LISSA, STONE SCOTT  
Address             4231 DESOTO AVE  
                          FORT MYERS FORT MYERS  
City-State-Zip:    FORT MYERS FL 33905