

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N92000000501

**FILED**  
**May 23, 2014**  
**Secretary of State**  
**CC7639351012**

**Entity Name:** THE EPISCOPAL CHURCH OF THE TRANSFIGURATION, INC.

**Current Principal Place of Business:**

15260 NW 19TH AVENUE  
MIAMI GARDENS, FL 33054

**Current Mailing Address:**

P.O. BOX 272  
OPA LOCKA, FL 33054 US

**FEI Number: 65-0804056**

**Certificate of Status Desired: No**

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

EVANS, GLORIA F  
14500 MAHOGANY COURT  
MIAMI LAKES, FL 33014-2636 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 P  
Name TAYLOR, TERRENCE  
Address 15260 NW 19TH AVENUE  
City-State-Zip: MIAMI GARDENS FL 33054

Title TD  
Name DENNIS, GLORIA  
Address 16311 NW 19 COURT  
City-State-Zip: MIAMI GARDENS FL 33054

Title VPD  
Name JOHNSON, LESA  
Address 1905 NW 87TH STREET  
City-State-Zip: MIAMI FL 33147

Title SD  
Name JOHNSON, KATHY  
Address 2759 NW 194TH TERRACE  
City-State-Zip: MIAMI GARDENS FL 33056

Title VPD  
Name CLARKE, LILLIE M  
Address 2501 NW 152 STREET  
City-State-Zip: MIAMI GARDENS FL 33054

Title VPD  
Name GLORIA, EVANS  
Address 14500 MAHOGANY COURT  
City-State-Zip: MIAMI LAKES FL 33014

*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: GLORIA F. EVANS**

**SENIOR WARDEN**

**05/23/2014**

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

\_\_\_\_\_  
Date