

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Apr 03, 2006 8:00 am
Secretary of State

04-03-2006 90403 042 ****61.25



DOCUMENT # N25880

1. Entity Name

**PILGRIM CONGREGATIONAL CHURCH, UNITED CHURCH
OF CHRIST, INC.**

Principal Place of Business

**6315 CENTRAL AVENUE
ST. PETERSBURG FL 33710**

Mailing Address

**6315 CENTRAL AVENUE
ST. PETERSBURG FL 33710**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-0799914

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

1st MOORE

CR2E037 (10/05)

6. Name and Address of Current Registered Agent

~~EDWARDS, KEITH~~
**10833 108TH STRET N
SAINT PETERSBURG FL 33707**

?

7. Name and Address of New Registered Agent

Name

FRANK J. BARRY

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

10833 108th Street, North

City

Seminole

FL

Zip Code
33778

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 **Frank J. Barry**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

03/20/06

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

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

TITLE **CD** Delete
NAME **BARRY, FRANK J**
STREET ADDRESS **10833 108TH STREET N**
CITY-ST-ZIP **SEMINOLE FL 33778**

TITLE **D** Delete
NAME **RUGA, LUCILLE**
STREET ADDRESS **1698-63RD STREET NORTH**
CITY-ST-ZIP **SAINT PETERSBURG FL 33710**

TITLE **J** Delete
NAME **HALL, JANET L.**
STREET ADDRESS **6848 14TH STREET SOUTH**
CITY-ST-ZIP **SAINT PETERSBURG FL 33705**

TITLE **D** Delete
NAME **FERGUSON, DOROTHY**
STREET ADDRESS **6264 BURLINGTON AVE. NORTH**
CITY-ST-ZIP **SAINT PETERSBURG FL 33710**

TITLE **T** Delete
NAME **MILES, DAVID A.**
STREET ADDRESS **8198 TERRACE GARDENS DRIVE # 209**
CITY-ST-ZIP **SAINT PETERSBURG FL 33709**

TITLE **D** Delete
NAME **HELD, GRACE M**
STREET ADDRESS **6740 GULFPORT BLVD. SO. #306**
CITY-ST-ZIP **ST. PETERSBURG FL 33707**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
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STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 Section 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: *Janet L. Hall*

Janet L. Hall/Treasurer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: **3/20/06** (Signature Phone #)