


2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 17, 2003 8:00 am
Secretary of State

03-17-2003 90131 020 ****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
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country



CHECK HERE IF MAKING CHANGES

4. FEI Number **59-0799914**

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
**BARRY, FRANK J
10833 108TH STREET N
SEMINOLE FL 33778**

7. Name and Address of New Registered Agent
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: *Frank J Barry* (NOTE: Registered Agent signature required when reinstating) DATE: **3/12/03**

FILE NOW: FEE IS \$61.25

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	<input type="checkbox"/> Delete
NAME	BARRY, FRANK J	
STREET ADDRESS	10833 108TH STREET N	
CITY-ST-ZIP	SEMINOLE FL 33778	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	WHITNEY, FRANCES J	
STREET ADDRESS	955 51ST ST N 301	
CITY-ST-ZIP	ST. PETERSBURG FL 33710	
TITLE	D	<input type="checkbox"/> Delete
NAME	LUCHS, ARTHUR	
STREET ADDRESS	5970 80TH STREET N, #112	
CITY-ST-ZIP	SAINT PETERSBURG FL 33709	
TITLE	D	<input type="checkbox"/> Delete
NAME	WEILL, MELANIE ANN	
STREET ADDRESS	16478 REDINGTON DR.	
CITY-ST-ZIP	REDDINGTON BEACH FL 33708	
TITLE	D	<input type="checkbox"/> Delete
NAME	TERRELL, GORDON	
STREET ADDRESS	587 59TH STREET S	
CITY-ST-ZIP	SAINT PETERSBURG FL 33707	
TITLE	D	<input type="checkbox"/> 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		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SEANOR, MAROLYN	
STREET ADDRESS	3686-101st Ave., N	
CITY-ST-ZIP	Pinellas Park, Fl 33782	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *FRANK J BARRY* (NOTE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) DATE: **3/12/03** (727) 397-8450

CR2E037 (10/02)