

**2004 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 15, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 702623</b> 1. Entity Name PINE GROVE COMMUNITY CHURCH, INC.			
Principal Place of Business 9200 49TH ST., N. PINELLAS PARK, FL 33782-5231 US		Mailing Address 9200 49TH ST., N. PINELLAS PARK, FL 33782	
<b>DO NOT WRITE IN THIS SPACE</b>			
		03032004 No Chg-NP CR2E037 (10/03)	
4. FEI Number 59-6580850		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent  DEBOER, GEORGE 10265 ULMERTON RD LOT 58 LARGO, FL 33771		<b>DO NOT WRITE IN THIS SPACE</b>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____			
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
<b>10. OFFICERS AND DIRECTORS</b>		<p>U000000114679 04/15/04-80060-010 61.25</p> <b>DO NOT WRITE IN THIS SPACE</b>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD DEBOER, GEORGE 10265 ULMERTON RD, LOT 58 LARGO, FL 33771		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD VELLENGA, RUSSELL 6751 15TH AVENUE NORTH SAINT PETERSBURG, FL 337105407		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD VELLENGA, MARY J 6751 15TH AVE NORTH ST PETERSBURG, FL 337105407		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD HOWERZYL, LAWRENCE 9200 49TH STREET NORTH PINELLAS PARK, FL 33782		
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
TITLE 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)(f), 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: <u>Mary J. Vellenga</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		MAY 1 J VELLENGA 4/12/04 (127) 343-0861 Date Signature Phone #	