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95 APR 18 PM 11:25

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Montem Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 711237 (8)

1. Corporation Name

FIRST PILGRIM CHURCH, INC.

Principal Place of Business	Mailing Address
6101 ARTHUR STREET HOLLYWOOD FL 33021	6101 ARTHUR STREET HOLLYWOOD FL 33021

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/21/1966	3a. Date of Last Report 04/11/1994
4. FBI Number 65-0153144	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 193.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip	Country
24	25
29	30

9. Name and Address of Current Registered Agent

**FORST, CAROLE
8551 N.W. 15TH STREET
PEMBROKE PINES FL 33024**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	OSBORN, DARLENE	1.2 NAME	
STREET ADDRESS	7960 PLANTATION BLVD.	1.3 STREET ADDRESS	
CITY - ST - ZIP	MIRAMAR FL 33023	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	OSBORN, HAROLD E III	2.2 NAME	
STREET ADDRESS	8431 N.W. 3RD STREET	2.3 STREET ADDRESS	
CITY - ST - ZIP	PEMBROKE PINES FL 33024	2.4 CITY - ST - ZIP	
TITLE	SD	3.1 TITLE	☐ Change ☐ Addition
NAME	OSBORN, KATHY	3.2 NAME	
STREET ADDRESS	8431 N.W. 3RD STREET	3.3 STREET ADDRESS	
CITY - ST - ZIP	PEMBROKE PINES FL 33024	3.4 CITY - ST - ZIP	
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	OSBORN, STEPHEN	4.2 NAME	
STREET ADDRESS	184 FOREST	4.3 STREET ADDRESS	
CITY - ST - ZIP	MARETTA GA	4.4 CITY - ST - ZIP	
TITLE	TD	5.1 TITLE	☐ Change ☐ Addition
NAME	FORST, CAROLE	5.2 NAME	
STREET ADDRESS	8551 N.W. 15TH STREET	5.3 STREET ADDRESS	
CITY - ST - ZIP	PEMBROKE PINES FL 33024	5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Carole Forst
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-11-95
Date

305(437-1946)
Telephone #