

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 25, 2006**  
**Secretary of State**

DOCUMENT# N04000000025

Entity Name: PILLAR COMMUNITY FOUNDATION, INC.

**Current Principal Place of Business:**

625 SW AVE B  
BELLE GLADE, FL 33430

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 331  
BELLE GLADE, FL 33430

**New Mailing Address:**

FEI Number: 01-0811049      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

SMITH, CHARLES  
1140 18TH AVE NORTH  
#2  
LAKE WORTH, FL 33460 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: RUSSELL, GERALDINE S  
Address: 275 SE 2ND AVE,  
City-St-Zip: SOUTH BAY, FL 33493

Title: VD ( ) Delete  
Name: MCDIFFIE, JIMMY  
Address: 1142 NW 30TH TERR.  
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: TD ( ) Delete  
Name: SMITH, TERRY  
Address: 1229 SW AVE C  
City-St-Zip: BELLA GLADE, FL 33430

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GERALDINE S. RUSSELL

PD

04/25/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date