

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N21849

1. Entity Name

PILGRIM NEW HOPE CHURCH INC.

FILED
Jul 07, 2002 8:00 am
Secretary of State

07-07-2002 90065 005 ****70.00

Principal Place of Business

Mailing Address

717 PARK AVENUE
 LAKE PARK FL 33403

717 PARK AVENUE
 LAKE PARK FL 33403

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

56-0303617

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☒

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TURNQUIST, EVELYN
 711 PARK AVENUE
 LAKE PARK FL 33403

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
 Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
 NAME TURNQUIST, EVELYN
 STREET ADDRESS 711 PARK AVENUE
 CITY-ST-ZIP LAKE PARK FL

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D ☐ Delete
 NAME WILLIAMS, RONALD
 STREET ADDRESS 218 7TH ST 9
 CITY-ST-ZIP LAKE PARK FL 33403

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE DC ☐ Delete
 NAME BROWN, ROY E.
 STREET ADDRESS 135 SCHEAFFER STREET
 CITY-ST-ZIP BROOKLYN NY

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE TD ☐ Delete
 NAME TARNQUIST, LEONARD E
 STREET ADDRESS 711 PARK AVE
 CITY-ST-ZIP LAKE PARK FL 33403

TITLE ☒ Change ☐ Addition
 NAME TD-TURNQUIST, LEONARD E.
 STREET ADDRESS
 CITY-ST-ZIP

TITLE SD ☐ Delete
 NAME WHITE, SHIRLEY
 STREET ADDRESS 6762 SOUTHERN SPRINGS CIRCLE
 CITY-ST-ZIP MORROW GA 30260-3143

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)