## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 11 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N2

(2)

THE PILGRIMS CHURCH, INC.

Principal Plac	e of Business	Mailing Address				(ODE BADAL BEDALDIN	ii asasa atkin asan isan
		13500 FRESHMAN LANE FORT MYERS FL 33912-					
					3. Date Incorporated or Qualified 12/31/1987	3a. Date of 04/	Last Report 18/1996
21	lace of Business	2a. Mailing Address 26			4. FEI Number 65-0015924		Applied For Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired		3.75 Additional Fee Required
Orty & Stat		City & State			6. Election Campaign Financing Trust Fund Contribution		5.00 May Be Added to Fees
Zip <b>24</b>	Country 25	Zıp <b>29</b>	30 Cox	untry		Yes No	
	9. Name and Address of Curre	nt Registered Agent	···	1	10. Name and Address of New Re	gistered Agen	t
				81 Name	•		
	N, DOUGLAS				ress (P.O. Box Number is Not Acceptate	ole)	
	FRASHMAN LANE			13500	) Freshman Lane		
FORT N	IYERS FL 33912			85			
				84 City		FL 85	1 ' 1
11. Pursuant office or i agent. La	to the provisions of Sections 617.050 registered agent, or both, in the State am familiar with, and accept the oblig	02 and 617.1508, Florida Stati e of Florida Such change was jations of, Section 617.0503, F	utes, the a authorize Florida Sta	ibove-named corp ed by the corpora itutes.	poration submits this statement for the partion's board of directors. I hereby acce	ourpose of char of the appointm	nging its registered lent as registered
SIGNATURE							
10	Signature, typed or printed name of registered ag		OTE: Registers	ed Agent signature requi	ired when reinstaling)  ADDITIONS/CHANGES TO OFFICE	DATE	ECTORC IN 12
12.	PD OFFICERS AN	ID DIRECTORS	1.1 7	······	ADDITIONS/CHANGES TO OFFIC		hange Addition
NAME	DODSON, DOUGLAS			NAME			
STREET ADDRESS	13500 FRESHMAN LANE			· I			
CITY-ST-ZIP	FT. MYERS FL			TOCKY ANNDERS I			
TITLE				STREET ADDRESS			
	4 ·····	☐ DFLETE	1.4 0	CITY-ST-ZIP			Change Addition
Ì	DV	☐ DELETE	1.4 C 2.1 T	CITY-ST-ZIP TITLE			hange Addition
NAME	DV SHEPPARD, JOHN	DELETE	1.4 C 2.1 T 2.2 N	CITY-ST-ZIP TITLE NAME		<u> </u>	change Addition
NAME STREET ADDRESS	DV SHEPPARD, JOHN 13500 FRESHMAN LANE	DELETE	1.4 C 2.1 T 2.2 N 2.3 S	CITY - ST - ZIP  TITLE  NAME  STREET ADDRESS	•	<b>□</b> 6	hange Addition
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NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DV SHEPPARD, JOHN 13500 FRESHMAN LANE FT. MYERS FL DST YARGER, PATTY 13500 FRESHMAN LANE	_	1.4 C 2.1 T 2.2 M 2.3 S 2.4 U 3.1 T 3.2 M 3.3 S	CITY-ST-ZIP  ITLE  IAME  STREET ADDRESS  CITY-ST-ZIP  ITLE  SAME  YAME  TELEPT ADDRESS	Katie Stephenson 13500 Freshman La	ine D	
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SIGNATURE: OFFICE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR OF LAND DESCRIPTION DESCRIP

14. I do 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 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?