2007 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # N25940

1. Entity Name
THE PILLAR GROUND HOLINESS DELIVERANCE CHURCH, INC.

Sep 07, 2007 08:00 A Secretary of State

FILED

Principal Place of Business

712 WEST LISBON PKWY DELAND, FL 32720

Mailing Address

712 WEST LISBON PKWY DELAND, FL 32720



DO NOT WRITE IN THIS SPACE

09042007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-3017452

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

KELLEY, WALTER 712 WEST LISBON PARKWAY DELAND, FL 32720

DO NOT WRITE IN THIS SPACE

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the obliga	itions of registered agent.	purpose of changing its registered	office or r	egistered agent, or be	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and til	la if applicable ' (NOTE Registered A	zent signature	s required when reinstating)	DATE
Filing Fee is \$61.25 Due by September 14, 2007		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees			
10.	OFFICERS AND DIRI	CTORS			A STATE OF THE STA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KELLEY, WALTER 712 W. LISBON PKWY DELAND, FL 32720			•	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DUBOSE, GLORIA 300 W ATWATER AVE #402 EUSTIS, FL 32726	·			U00000773551 09/07/07-80003-010 61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PORTER, JEROME 719 E NEW ST DELAND, FL 32724			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KELLEY, EVELYN 712 W. LISBON PKWY DELAND, FL 32720		IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY+ST-ZP	D SMART, KEN 129 BRIDGEHAVEN DR PALM COAST, FL 32135				
TITLE NAME	ST PORTER, LINDA				

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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:

CITY-ST-ZIP

STREET ADDRESS 719 E NEW ST