

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25940

FILED
Apr 13, 2009
Secretary of State

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

Current Principal Place of Business:

712 WEST LISBON PKWY
DELAND, FL 32720

New Principal Place of Business:

Current Mailing Address:

712 WEST LISBON PKWY
DELAND, FL 32720

New Mailing Address:

FEI Number: 59-3017452

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KELLEY, WALTER
712 WEST LISBON PARKWAY
DELAND, FL 32720 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: KELLEY, WALTER
Address: 712 W. LISBON PKWY
City-St-Zip: DELAND, FL 32720

Title: D () Delete
Name: DUBOSE, GLORIA
Address: 300 W ATWATER AVE #402
City-St-Zip: EUSTIS, FL 32726

Title: D () Delete
Name: PORTER, JEROME
Address: 719 E NEW ST
City-St-Zip: DELAND, FL 32724

Title: D () Delete
Name: KELLEY, EVELYN
Address: 712 W. LISBON PKWY
City-St-Zip: DELAND, FL 32720

Title: D () Delete
Name: SMART, KEN
Address: 129 BRIDGEHAVEN DR
City-St-Zip: PALM COAST, FL 32135

Title: ST () Delete
Name: PORTER, LINDA
Address: 719 E NEW ST
City-St-Zip: DELAND, FL 32724

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:

Title: () Change () Addition
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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 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: MARLA ASAY

BK

04/13/2009

Electronic Signature of Signing Officer or Director

Date