


FILE NOW: FILING FEE IS \$61.25

FILED

Feb 17 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N27401 (1)
1. Corporation Name
PILGRIM'S REST CHURCH OF VERO BEACH, INC.

Principal Place of Business 1180 27TH AVE VERO BEACH FL 32960	Mailing Address P.O. BOX 818 MELBOURNE FL 32902-0818
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3. Date Incorporated or Qualified
07/12/1988

4. FEI Number 65-0059633	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent BRINSON, J. LESLIE 4970 MARGARET ANN LANE FT PIERCE FL 34946	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	<input type="checkbox"/> DELETE BRINSON, J. LESLIE	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		1.2 NAME	
STREET ADDRESS	4970 MARGARET ANN LANE	1.3 STREET ADDRESS	
CITY-ST-ZIP	FT PIERCE FL 34946	1.4 CITY-ST-ZIP	
TITLE VD	<input type="checkbox"/> DELETE HAMILTON, MARION	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		2.2 NAME	
STREET ADDRESS	2155 34TH AVENUE	2.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BEACH FL 32960	2.4 CITY-ST-ZIP	
TITLE S	<input type="checkbox"/> DELETE WATKINS, JACKIE H	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		3.2 NAME	
STREET ADDRESS	4775 QUAIL RUN PLACE	3.3 STREET ADDRESS	
CITY-ST-ZIP	MELBOURNE FL 32904	3.4 CITY-ST-ZIP	
TITLE TD	<input type="checkbox"/> DELETE LAWRENCE, RICHARD A JR	4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		4.2 NAME	
STREET ADDRESS	2112 S. GRANT PLACE	4.3 STREET ADDRESS	
CITY-ST-ZIP	MELBOURNE FL 32901	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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.

SIGNATURE: Brinson, J. Leslie 2/8/98 561-464-4462

CF2E037 (10/97)