## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Jan 18, 2000 8:00 am Secretary of State **DOCUMENT # N44163** THE PILGRIMAGE, INC. 01-18-2000 90118 036 \*\*\*\*61.25 Principal Place of Business Mailing Address 556 1/2 CLEARWATER/LARGO RD NORTH P.O. BOX 5204 CLEARWATER FL 33758-5204 1676 SOUTH BELCHER ROAD LARGO FL 33770 3. Mailing Address 2. Principal Place of Business 5<u>56 1/2 Clearwater/Largo Rd</u> Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 59-3072288 Not Applicable 33779 Largo, Fl Zip Country Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required Pinellas 33770 6. Name and Address of Current Registered Agent ----7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) CLARK, GERTRUDE J. 2019 CORONET LANE CLEARWATER FL 33764-3742 City 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 10. PD X Addition Change TITLE ☐ Delete TITLE DIANE MALTBY WHARTON, MARTHA NAME STREET ADDRESS STREET ADDRESS 1373 FAIRFAX RD 36-country5club CITY-ST-ZIP CITY-ST-ZIP CLEARWATER FL 33764-3722 LARGO, FL 33771 🔀 Delete TITLE Change X Addition TITLE THOMAS, DUANE NAME NAME JEAN JOLLY STREET ADDRESS STREET ADDRESS 126 WOODCREEK DR EAST 713 S. DELAWARE CITY-ST-ZIP CITY-ST-ZIP SAFETY HARBOR FL 34695-5519 TAMPA FL 33606 Delete TITLE X Change Addition TITLE TD CLARK, GERTRUDE J. NAME NAME MARTHA WHARTON STREET ADDRESS STREET ADDRESS 2019 CORONET LANE 1373 FAIRFAX RD CITY-ST-ZIE CITY-ST-ZIP CLEARWATER FL 33764-3742 <u>CLEARWATER, FL 33764-3742</u> ☐ Delete TITLE ☐ Change ☐ Addition BERCHER, MARLENE E NAME NAME STREET ADDRESS STREET ADDRESS 2008 NURSERY RD CITY-ST-ZIP CITY-ST-7/P CLEARWATER FL 33764 Change ☐ Addition TITLE Delete TITLE NAME GYLFE, BETSY NAME STREET ADDRESS STREET ADDRESS 3178 SHORLINE DR CITY-ST-ZIP CITY-ST-ZIP CLEARWATER FL 33760-1736 ☐ Addition ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 annowered.

(727) 531-6838 GERTRUDE JA TCLARK SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF Date Daytime Phone #

changed, or on an attachment with an address, with all other like