


**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 09, 2004 08:00 AM
Secretary of State

DOCUMENT # N94000006068 1. Entity Name PILGRIM COMMUNITY CHURCH, INC.	
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Principal Place of Business 1725 VOLUSIA AVE., SO. ORANGE CITY, FL 32763	Mailing Address 176 EUCLID AV NORTH LAKE HELEN, FL 32744
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DO NOT WRITE IN THIS SPACE



01252004 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-3298497	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TAYLOR, RICHARD W.
112 NORTH FL. AVE.
DELAND, FL 32720

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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. I am familiar with, and accept the obligations of registered agent.

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

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD O'KEEFE, BONNIE S P.O. BOX 3043 DELAND, FL 32721
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPMD CHAPLAIN LEWIS C. LONG III 176 EUCLID AVE. N. LAKE HELEN, FL 32744
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MARSHALL, JAMES P O BOX 57 CASSADAGA, FL 32706
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHARPE, WILLIAM 323 BLUE LAKE TERR DELAND, FL 32720
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HUMENAI, DEBORAH 1395 1ST ST ORANGE CITY, FL 32763
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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02/09/04-80101-004 66.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: Lewis C. Long III 25 Jan 2004 386/228-2696
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Designate Phone #

Lewis C. Long III