

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000006068

Entity Name: PILGRIM COMMUNITY CHURCH, INC.**Current Principal Place of Business:**1725 SOUTH VOLUSIA AVE.
ORANGE CITY, FL 32763**Current Mailing Address:**176 EUCLID AV NORTH
LAKE HELEN, FL 32744**FEI Number: 59-3298497****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**TAYLOR AND NORDMAN, ATTORNEYS
112 NORTH FL. AVE.
DELAND, FL 32720 US*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**Officer/Director Detail :**

Title	TD
Name	O'KEEFE, BONNIE S
Address	P.O. BOX 3043
City-State-Zip:	DELAND FL 32721

Title	V
Name	MARSHALL, JAMES
Address	P O BOX 57
City-State-Zip:	CASSADAGA FL 32706

Title	S
Name	MARSHALL, BRENT
Address	P.O. BOX 57
City-State-Zip:	CASSADAGA, FL 32706

Title	CPMD
Name	CHAPLAIN LEWIS C. LONG III
Address	176 EUCLID AVE. N.
City-State-Zip:	LAKE HELEN FL 32744

Title	D
Name	MUSSER, DR DONALD W
Address	STETSON UNIV UNIT 8354, 421 N. BLVD
City-State-Zip:	DELAND FL 32723

Title	D
Name	FINN, STEPHEN M
Address	P.O. BOX 129
City-State-Zip:	LAKE HELEN FL 32744

I hereby 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 all other like empowered.

SIGNATURE: CHAPLAIN LEWIS C. LONG III, USAF(RET)**CPMD****02/22/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date