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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

1. Corporation Name

728277

(5)

VICTORY TABERNACLE CHURCH, INC.

Principal Place of Business Mailing Address								
527 WILLOW BRANCH 527 WILLOW BRANCH VICTORY TABERNACLE VICTORY TABERNACL JACKSONVILLE FL 32254 JACKSONVILLE FL 32			E					
PHOROGITI	LLL TE GEEGT	PHOTOGRAPHE LE SEES				3. Date Incorporated or Qualified 01/17/1974 3a. Date of Last Report 02/15/1995		
2. Principal P	tace of Business	2a. Mailing Address 26				4. FEI Number 59-2527078	Applied For Not Applicable	
Suite, Apt #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required		
City & State		City & State				6. Election Campaign Financing \$5.00 May Be		
23		28				Trust Fund Contribution		ed to Fees
Zφ	Country	Zip	Country			8. This corporation has liability for in		. 199.032,
24	25 29 30 30 9. Name and Address of Current Registered Agent			Florida Statutes				
<u></u>	9, Name and Address of Curren	it Hegisterea Agent		81	Name	10. Name and Address of New He	gistered Agent	
NICHO	LAS, LEBON A.							
	UNNYSIDE ST.			82	Street Addres	ss (P.O. Box Number is Not Acceptable	>	
	ONVILLE FL 32205		Ī	83				
				84	City		FL 85 Zi	p Code
or registe	to the provisions of Sections 617.0502 ered agent, or both, in the State of Flori ith, and accept the obligations of, Sect	da. Such change was authori.	zed by the c	ve na corpo	amed corporal oration's board	tion submits this statement for the purp of directors. I hereby accept the appoin	ose of changing its	registered office d agent. I am
PICALATURE	, ,	•	<u>.</u>					
	Signature, typed or printed name of registered agent			Ajert	signature required s		DATE	
12.	OFFICERS AN	D DIRECTORS	13.	T. F.		ADDITIONS/CHANGES TO OFFIC		DRS IN 12
NAME	NICHILAS, LEBON A.	Eperete	1 1 TII 1 2 N/				☐ Change	L Addition
STREET ADDRESS	2792 SUNNYSIDE ST				ADDRESS			
CITY - ST - ZIP	JACKSONVILLE FL			ITY-ST				
TITLE	VD DELETE		2 1 T)				Change	Addition
NAME	NICHOLAS, ANNIE V		22 N/	2 2 NAME				
STREET ADDRESS	2792 SUNNYSIDE ST.		23 ST	TREFT A	ADDRESS			
CITY - ST- 7IP	JACKSONVILLE FL		2 4 C	ITY-S	T-ZIP			
TITLE	SD SOUNDEDER CARROLVALE	DELETE	3 1 TI				Change	☐ Addition
NAME	ROUNDTREE, CAROLYN E.		3 2 NA					
STREET ADDRESS	1610 W 36TH ST JACKSONVILLE FL				ADDRESS			!
CITY-ST-ZIP TITLE	T ONOROUTTILLE FL	DELETE	3.4 C 4.1 TI	HY-SI	1 - ZIP		Change	Addition
NAME	JENKINS, PATRICIA F.		4.7 H				onange	
STREET ADDRESS	400 0417 41 51115				ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL			ITY-ST				
TITLE		DELETE	5 1 TI				☐ Change	Addition
NAME			5 2 NA	AME				
STREET ADORESS			5 3 \$1	TREET	adoress			
CITY - ST - ZIP			5 4 CI	(TY - \$T	- ZIP			
TILLE		DELETE	6 1 TI				Change	Addition Addition
NAME			62 N					
STREET ADDRESS				TREET A	ADDRESS			

SIGNATURE: Life Signature and Typed on Printed Name of Signing Officer on Director Nicholas 1-28-96 904-3899890

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

32E037 (12/95