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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 755048

1. Corporation Name

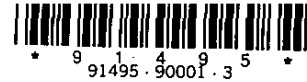
VICTORY BAPTIST CHURCH OF OSPREY, INC.

Principal Place of Business

~~846 S. TAMAMI TRAIL
OSPREY FL 34229~~

Mailing Address

~~846 S. TAMAMI TRAIL
OSPREY FL 34229~~



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	341 Burney Road	26	Suite, Apt. #, etc.	11/07/1980	
22		27		4. FEI Number	
23	City & State	28	City & State	59-2045440	
24	Zip	25	Country	5. Certificate of Status Desired ☐ - \$8.75 Additional Fee Required	
24	34229	25	USA	6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees	
29	Zip	30	Country	Trust Fund Contribution ☐	

9. Name and Address of Current Registered Agent

ELAM, ARLO REV.
1109 DONA WAY
NOKOMIS FL 34275

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

11. Pursuant to the provisions of Sections 617.0502 and 617.1503, 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

[Signature]

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	ELAM, ARLO REV.	1.2 NAME	
STREET ADDRESS	1109 DONA WAY	1.3 STREET ADDRESS	
CITY-ST-ZIP	NOKOMIS FL	1.4 CITY-ST-ZIP	
TITLE	TD	2.1 TITLE	☒ Change ☐ Addition
NAME	LAMB, DONALD C.	2.2 NAME	Trustee HUNT
STREET ADDRESS	3616 ASBURY PLACE	2.3 STREET ADDRESS	1624 Lilac Lane
CITY-ST-ZIP	SARASOTA FL	2.4 CITY-ST-ZIP	Venice, FL 34293
TITLE	TD	3.1 TITLE	☒ Change ☐ Addition
NAME	FRANCIS, AL	3.2 NAME	Trustee
STREET ADDRESS	716 LAUREL AVENUE	3.3 STREET ADDRESS	Ralph YAKAM
CITY-ST-ZIP	VENICE FL	3.4 CITY-ST-ZIP	160 Palm Air Dr.
TITLE	S	4.1 TITLE	☐ Change ☐ Addition
NAME	TAINTOR, EILEEN	4.2 NAME	Osprey, FL 34229
STREET ADDRESS	919 HAMPTON ROAD	4.3 STREET ADDRESS	
CITY-ST-ZIP	NOKOMIS FL 34275	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ 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, with all other like empowered.

SIGNATURE:

[Signature]

1/4/99 (941) 966-4716