

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000004769

1. Entity Name

THE VICTORY SHIP, INC.

FILED
Aug 25, 2002 8:00 am
Secretary of State

08-25-2002 90196 004 ****61.25

0011990

Principal Place of Business

705 CHANNELSIDE DR
TAMPA FL 33602

Mailing Address

705 CHANNELSIDE DR
TAMPA FL 33602

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number
59-3529783

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

TIMMEL, JOHN C
3013 HAWTHORNE ROAD
TAMPA FL 33611

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

After September 13, 2002,
min. will be \$236.25.

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE	CD	☐ Delete
NAME	MULLIS, HAROLD W JR.	
STREET ADDRESS	101 E. KENNEDY BLVD. #2700	
CITY-ST-ZIP	TAMPA FL 33602	
TITLE	TD	☒ Delete
NAME	FSK, ALAN	
STREET ADDRESS	400 N. ASHLEY DRIVE #1925	
CITY-ST-ZIP	TAMPA FL 33602	
TITLE	D	☐ Delete
NAME	CARROLL, MIKE	
STREET ADDRESS	490 1ST AVENUE SOUTH	
CITY-ST-ZIP	SAINT PETERSBURG FL 33701	
TITLE	D	☒ Delete
NAME	LYKES, JOSEPH T	
STREET ADDRESS	1810 S. MACDILL AVENUE #1	
CITY-ST-ZIP	TAMPA FL 33606	
TITLE	SD	☐ Delete
NAME	HARDEN, CHARLES	
STREET ADDRESS	1404 AZEELE STREET	
CITY-ST-ZIP	TAMPA FL 33606	
TITLE	D	☐ Delete
NAME	FRANZBLAU, ROBERT	
STREET ADDRESS	5401 HANGAR COURT	
CITY-ST-ZIP	TAMPA FL 33634	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
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 empowered.

SIGNATURE:

SIG: [Signature]

August 1, 2002

CR2E037 (4/02)