

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04793

Entity Name: LIVING WITH VICTORY MINISTRIES, INC.**Current Principal Place of Business:**679 EVANS COVE RD.
MAGGIE VALLEY, NC 28751**Current Mailing Address:**P.O.BOX 1982
MAGGIE VALLEY, NC 28751 US**FEI Number:** 59-2532279**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CROWDER, DAVID
820 LAKE KATHRY CR
CASSELBERRY, FL 32707 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	PC
Name	GIORGIO, ANTHONY J PRES
Address	679 EVANS COVE RD.
City-State-Zip:	MAGGIE VALLEY NC 28751

Title	SEC
Name	GIORGIO, LAUREEN MRS.
Address	679 EVANS COVE RD.
City-State-Zip:	MAGGIE VALLEY NC 28751

Title	TRUSTEE
Name	FRANK, MITCHEL ESQ.
Address	5108 KEENELAND CIR
City-State-Zip:	ORLANDO FL 32819

Title	TREA
Name	TIRRELL, RICHARD CPA
Address	854 MOUNT VALLEY RD
City-State-Zip:	WAYNESVILLE NC 28785

Title	TRUSTEE
Name	PEARSON, SHAWN MR.
Address	4521 BLOXHAM CUT OFF
City-State-Zip:	CRAWFORDVILLE FL 32327

Title	TRUSTEE
Name	CARTER, KATHY
Address	229 FORGE CREEK LANE
City-State-Zip:	MILLS RIVER NC 28759

Title	TRUSTEE
Name	JONES , DEREK WAYNE MR.
Address	145 HAPPY HILL ROAD
City-State-Zip:	WAYNESVILLE NC 28786

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: GIORGIO ANTHONY J.**PRESIDENT****03/17/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date