

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 708788

1. Corporation Name

VICTORY BAPTIST CHURCH, INC. OF ORLANDO

Principal Place of Business

6600 HOFFNER AVE
P.O. BOX 726668
ORLANDO FL 32822-325
US

Mailing Address

6600 HOFFNER AVE
P.O. BOX 726668
ORLANDO FL 32822-325
US

2. Principal Place of Business

21 6600 Hoffner Ave

Suite, Apt. #, etc.

22

City & State

23 Orlando, FL

Zip

24 32822

Country

25 Orange

2a. Mailing Address

26 6600 Hoffner Ave

Suite, Apt. #, etc.

27

City & State

28 Orlando, FL

Zip

29 32822

Country

30 Orange

3. Date Incorporated or Qualified

04/13/1965

4. FEI Number

59-2171719

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

MYERS, BARBARA E.
5312 DEXTER ST
ORLANDO FL 32807

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 617.1508, 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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME TR
SCOTTO, TONY
STREET ADDRESS 3839 JANIE CT.
CITY-ST-ZIP ORLANDO FL

TITLE ☐ DELETE

NAME D
BORGESON, TIM
STREET ADDRESS 1130 BELVEDERE ROAD
CITY-ST-ZIP ORLANDO FL

TITLE ☐ DELETE

NAME D
HALL, DWIGHT
STREET ADDRESS 214 PALMYRA DR
CITY-ST-ZIP ORLANDO FL

TITLE ☐ DELETE

NAME D
HUGGINS, EDDIE
STREET ADDRESS 5310 DEXTER STREET
CITY-ST-ZIP ORLANDO FL

TITLE ☐ DELETE

NAME D
HOWELL, MICHAEL
STREET ADDRESS 9425 BUXTON CT.
CITY-ST-ZIP ORLANDO FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-14-99

Date

407-275-1631

Daytime Phone #

CR2E037 (11/98)

0018110

FILED
Apr 20, 1999 8:00 am
Secretary of State

04-20-1999 90302 011 ****70.00

