

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2004 8:00 am
Secretary of State

04-07-2004 90011 050 ****70.00

DOCUMENT # 708788

1. Entity Name
VICTORY BAPTIST CHURCH, INC. OF ORLANDO



Principal Place of Business
**6600 HOFFNER AVE
ORLANDO, FL 32822-325 US**

Mailing Address
**6600 HOFFNER AVE
ORLANDO, FL 32822-325 US**

94045901



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03262004 Chg-NP CR2E037 (10/03)

4. FEI Number
59-2171719

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MYERS, BARBARA E.
707 N SOLANDRA DR
ORLANDO, FL 32807**

7. Name and Address of New Registered Agent

Name **HOLMES HERNANDEZ**

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

5206 Conch Ct.

City **Orlando** FL Zip Code **32819**

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 signing officer or director and title is applicable.)

(NOTE: Registered Agent signature required when reinstating)

03/26/04
DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

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

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

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☒ Addition
NAME **Hernandez, Holmes**
STREET ADDRESS **5206 Conch Ct**
CITY-ST-ZIP **Orlando FL 32819**

TITLE ☐ Change ☒ Addition
NAME **Luz M. Hernandez**
STREET ADDRESS **5206 Conch Ct**
CITY-ST-ZIP **Orlando, FL 32819**

TITLE ☐ Change ☒ Addition
NAME **Rolon, Brenda**
STREET ADDRESS **2934 Autumn Run Ct**
CITY-ST-ZIP **Orlando, FL 32822**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/26/04
Date

Daytime Phone #