## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

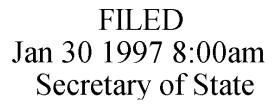
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 708817

(2)

VICTORY BAPTIST CHURCH INC., OF JACKSONVILLE



Principal Plac							8   8   8   8   8   8   8   12   12   12		I BITIK KERA
Principal Place of Business Mailing Address						F LIDERIA IDUDI DALIBI IDIDI IDIDI ILIDI ILI	DI BIBH DIBN		1 01816 1001
10613 LEM TURNER RD JACKSONVILLE FL 32218  JACKSONVILLE FL 32218-4561									
						3. Date Incorporated or Qualified 04/19/1965	3a. Da	te of Last Re 2/26/199	eport 6
2. Principal Place of Business 2s. Mailing Address						4. FEI Number Applie			plied For
21		26			59-6183727 Not Applicate				
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired See Required Fee Required				
City & Stat	le	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip	Country	Zip	Cou	ntry	,	8. This corporation has liability for	intangible	tax under s.	199.032,
24	25]	29	30				Yes [		
	9. Name and Address of Curren	it Registered Agent			r ::	10. Name and Address of New Re	gistered /	gent	
				81	Name				
BOYETT, ALTON				82	Street Add	ress (P.O. Box Number is Not Acceptable)			
11111 PINE ESTATES ROAD JACKSONVILLE FL 32218				83					
UNCHOOL	THE TE GEE TO								
				84	City		FL	<b>85</b> Zip (	Code
office or r	registered agent, or both, in the State am familiar with, and accept the oblig-	of Florida, Such change was	authorized	d by	zithe corpora	poration submits this statement for the pation's board of directors. I hereby acceptions	ot the app	ointment as	registered registered
	Signature, typed or printed name of registered age			Agr	uper orulang a luc	ired wher reinstaling)	DATE OF THE	DIDECTOR	0.151.40
12.	OFFICERS AN	DELETE DELETE	13. 1.1 III	ti E	r-	ADDITIONS/CHANGES TO OFFIC	JEHS ANL	Change	S IN 12 Addition
NAME	VAN DELINDER, JOHN C. D		1.2 NA					L Change	L.J Addition
STREET ADDRESS	10613 LEMTURNER RD.		i i		ADDRESS				
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CI						
TITLE	C	DELETE	2.1 1		31-211			Change	Addition
NAME	BOYETT, ALTON		2.2 NA		Ì				
STREET ADDRESS	11111 PINE ESTATES ROAD				ADDRESS				
CITY-ST-ZIP	JACKSONVILLE, FL 0				ST-ZIP				
TITLE	SD	DELETE	3 1 1 1					Change	Addition
NAME	EFFLER, TOM		3 2 NA	AME					
STREET ADORESS	1309 PIEDMONT ROAD		3.3 ST	RÉET	ADDRESS				
CITY-ST-ZIP	JACKSONVILLE FL		3.4. CI	HY-S	ST - ZIP				
TITLE	TD	DELETE	4.1 TIT	TLE				Change	Addition
NAME	ANDERSON, JOHN		4. 2 N	AME					
STREET ADDRESS	=		4.3 ST	REE I	ADDRESS				
CHTY-ST-ZIP	CALLAHAN FL		4.4 CI	TY-S	ST-ZIP				
TITLE		DELETE	5.1 Tr	ILE		<del></del>		Change	Addition
NAME			5.2 NA	Mf					
STREET ADDRESS	1		5.3 ST	REET	ADDRESS				
CITY-ST-ZIP			5 4 Cl	1Y-S	ST - ZIP				
TITLE		DELETE	6.1 TI	TLE				Change	Addition
NAME			6.2 NA	AME					
STREET ADDRESS			6.3 S1	REET	ADDRESS				
CITY-ST-ZIP	<u></u>		6.4 CI	14 - 5	ST - ZIP		<del></del>		

4. I do 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.

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