

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 11, 2007 8:00 am
Secretary of State

07-11-2007 90075 032 ****70.00

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07062007 Chg-NP CR2E037 (12/06)

DOCUMENT # 708817 1. Entity Name VICTORY BAPTIST CHURCH INC., OF JACKSONVILLE					
Principal Place of Business 10613 LEM TURNER RD JACKSONVILLE, FL 32218			Mailing Address 10613 LEM TURNER RD JACKSONVILLE, FL 32218		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-6183727	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MERRIWETHER, SCOTT 9350 MIDDLEBURY GLEN CT. JACKSONVILLE, FL 32256			7. Name and Address of New Registered Agent Name Carl Lundy Street Address (P.O. Box Numbers Not Acceptable) 43813 Freedom Drive City Callahan FL Zip Code 32011		
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 <small>Signature, typed or printed name of registered agent and title if applicable</small>			DATE 7/6/07 <small>(NOTE: Registered Agent signature required when reinstating)</small>		
Filing Fee is \$61.25 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VAN DELINDER, JOHN C. D 10613 LEMTURNER RD. JACKSONVILLE, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD MERRIWETHER, SCOTT 9350 MIDDLEBURY GLEN CT. JACKSONVILLE, FL 32256	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD Carl Lundy 43813 Freedom Drive Callahan, FL 32011	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GRIFFIN, BRUCE 3940 BASSENT JACKSONVILLE, FL 32218	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Jeff Fowler 9438 Ford Road Bryceville, FL 32092	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KICHER, MICHAEL 1231 SUMMIT OAKS DRIVE WEST JACKSONVILLE, FL 32221	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D John Anderson 45153 Stratton Road Callahan, FL 32011	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DENHAM, KENNETH 92 GRIFFIN BLUFF ROAD KINGSLAND, GA 31548	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Dave Wright 12125 Phaspect Drive N. Jacksonville, FL 32218	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MD James Koerts 521 moby Dick Drive S. Jacksonville, FL 32218	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			DATE 7/6/07 <small>Date</small>		
<small>Daytime Phone #</small>					