2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 708817

FILED May 12, 2003 Secretary of State

Entity Name: VICTORY BAPTIST CHURCH INC., OF JACKSONVILLE

Current Principal Place of Business:		New Principal Place of Business:		
	M TURNER R IVILLE, FL 32			
Current Mailing Address:		New Mailing Address:		
	M TURNER R IVILLE, FL 32			
El Number	: 59-6183727	FEI Number Applied For()	FEI Number Not Applicable	e () Certificate of Status Desired ()
Name and	l Address of	Current Registered Agent:	Name and Add	ress of New Registered Agent:
	:ARL L REVERE D IVILLE, FL 32			
Γhe above			purpose of changing its reg	gistered office or registered agent, or both,
The above n the State	e of Florida.		purpose of changing its reg	gistered office or registered agent, or both,
The above n the State	e of Florida. [*] RE:			gistered office or registered agent, or both, Date
The above n the State SIGNATUI	e of Florida. [*] RE:	y submits this statement for the	gent	
The above n the State SIGNATUI DFFICER: Title: Jame: Address:	e of Florida. RE: Electro S AND DIRE PD (y submits this statement for the poinc Signature of Registered Age CTORS:) Delete ER, JOHN C. D JRNER RD.	gent	Date
The above n the State SIGNATUI	e of Florida. RE: Electro S AND DIRE PD (VAN DELINDI 10613 LEMTO JACKSONVIL CD (LUNDY, CAR 7880 PAUL R	y submits this statement for the ponic Signature of Registered Age CTORS: () Delete ER, JOHN C. D JRNER RD. LE, FL () Delete	gent ADDITIONS/CH Title: Name: Address:	Date HANGES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: DR. JOHN C. VAN DELINDER PD 05/12/2003