## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## Secretary of State **DOCUMENT # 709122** 1. Entity Name 05-03-2005 90089 043 \*\*\*\*61.25 THE VICTORY BAPTIST CHURCH OF WEST PALM BEACH, INC. Principal Place of Business Mailing Address **BEACH** 40078130 **BEACH** 4601 FOREST HILL BLVD. W. PALM BEACH FL 33415 4601 FOREST HILL BLVD. W. PALM BEACH FL 33415 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) Applied For City & State City & State 4. FEI Number 59-1001013 Not Applicable Ζip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ARNOLD, C. WARREN 3703 HERTFORD COURT Street Address (P.O. Box Number is Not Acceptable) LAKE WORTH FL 33467 City Zip Code 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. r Karry S SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1,2005 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11 ■ Addition TITLE ☐ Delete THUE Change Higgs, Larry JAMES BEATY, LEONARD H. NAME NAME 2542 HAVENWOOD STREET ADDRESS 5917 Saint Barbara Street STREET ADDRESS W. PALM BEACH FL CITY-ST-ZIP CITY-ST-ZIP West Palm Beach, FL 33415 TITL F ☐ Delete **Change** ■ Addition HIGGS, JAMES L. NAME NAME Beaty, Hal 5917 ST.BARBARA ST. STREET ADDRESS STREET ADDRESS 2542 Havenwood Road W. PALM BEACH FL. West Palm Beach, FL 33415 CITY-ST-ZIP CITY-ST-7/P ☐ Addition ☐ Delete TITLE ARNOLD, C. WARREN NAME NAME 3703 HERTFORD COURT STREET ADDRESS STREET ADDRESS LAKE WORTH FL CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Defete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change Addition ☐ Defete THEE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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** 

**FILED** 

4-36-05 561-965-5009
Daie Dayline Phona #

May 03, 2005 8:00 am