


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 11, 2006 8:00 am
Secretary of State

05-11-2006 90236 036 ****61.25

DOCUMENT # 725673
 1. Entity Name
VICTORY CHURCH OF THE NAZARENE INC.



Principal Place of Business 4401 58 ST N KENNETH CITY, FL 33709	Mailing Address 4401 58 ST N KENNETH CITY, FL 33709
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01062006 No Chg-NP CR2E037 (11/05)

4. FEI Number 59-6598021	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

HAMBRICK, ROCLIN REV
 4401 58TH ST N
 SAINT PETERSBURG, FL 33709

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25
 Due by May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	T
NAME	BRYAN, ARLENE <i>Rabb, Allyson</i>
STREET ADDRESS	9511 46 ST N <i>9044 3 ST N</i>
CITY-ST-ZIP	PINELLAS PARK, FL 33782 <i>ST. Petersburg, FL 33702</i>
TITLE	D
NAME	DANIELS, BOB
STREET ADDRESS	2400 GRANADA CIR E
CITY-ST-ZIP	SAINT PETERSBURG, FL 33712
TITLE	D
NAME	WADE, GRACE <i>Wilkinson, Luther</i>
STREET ADDRESS	6348 35 AVE N <i>6128 38 Ave N</i>
CITY-ST-ZIP	SAINT PETERSBURG, FL 33710 <i>ST. Petersburg, FL 33710</i>
TITLE	SD
NAME	ANDERSON, ROSA
STREET ADDRESS	4325 70TH AVE N
CITY-ST-ZIP	PINELLAS PARK, FL 33781
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: *Roelin K. Hambr* *Roelin K. Hambrick* *4/25/06* *727 546 0990*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #