2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Jan 12, 2007 8:00 am Secretary of State **DOCUMENT #726602** 01-12-2007 90018 042 ****70.00 VICTORY BIBLE BAPTIST CHURCH, INC. Principal Place of Business Mailing Address 3906 ANDREWS AVENUE P.O. BOX 18303 PENSACOLA, FL 32505 PENSACOLA, FL 32523 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #. etc. 01062007 Chg-NP CR2E037 (12/06) 4. FEI Number 59-3023200 City & State Applied For City & State Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name REIERSON, ROBERT Street Address (P.O. Box Number is Not Acceptable) 3145 PATRICIA DR. PENSACOLA, FL 32506 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 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Due by May 1, 2007 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 SD ☐ Addition TITLE ☐ Delete TITLE DEMAREST, CANDY NAME NAME 6311 FAIRVIEW DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PENSACOLA, FL 32526 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Channe ☐ Addition NAME REIERSON, ROBERT NAME 3145 PATRICIA DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PENSACOLA, FL 32526 CITY-ST-ZIP ٧n ☐ Delete TILE ☐ Change ☐ Addition TITLE COTTON, ALLEN NAME NAME STREET ADDRESS 5465 BRADLEY ST. STREET ADDRESS CITY-ST-ZIP PENSACOLA, FL 32526 CITY-ST-ZIP

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 emachment with an address, with all other like empowered to the corporation 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

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Robert Bastor/President SIGNATURE AND TYPED OR PRINTED HAME OF SIGNATURE

CASTLEBERRY, KENNETH

CANTONMENT, FL 32533

10151 GUIDY LANE APT. G8

PENSACOLA, FL 32514

2015 RYALE RD.

KUNTZ, GARRETT

TITLE

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-7P

CITY-ST-ZIP

NAME

Kuntz, Garrett 2355 W. Michigan Ave. Apt. A8

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