

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.**  
**AMOUNT DUE ON OR BEFORE 8/9/95: \$100 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$200)**

**NONPROFIT CORPORATION ANNUAL REPORT 1995**



FLORIDA DEPARTMENT OF STATE  
 Sandra B. Morham  
 Secretary of State  
 DIVISION OF CORPORATIONS

SEARCHED  
 FILED  
 DIVISION OF CORPORATIONS  
 95 JUN 23 AM 9:52

**DOCUMENT # 729188 (3)**

1. Corporation Name  
**VICTORY CHRISTIAN CENTER CHURCH, INC.**

Principal Place of Business      Mailing Address  
 1134 BLANDING BLVD.  
 ORANGE PARK FL 32065-6704      1134 BLANDING BLVD.  
 ORANGE PARK FL 32065-6704

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified      3a. Date of Last Report  
**03/28/1974**      **04/29/1994**  
 4. FEI Number      Applied For / Not Applicable  
**59-1896370**  
 5. Certificate of Status Desired       \$8.75 Additional Fee Required  
 6. Election Campaign Financing Trust Fund Contribution       \$5.00 May Be Added to Fees  
 7. Nonprofit with IRS 501(c)(3) Tax Exempt Status       **FILING FEE IS \$61.25**  
 8. This corporation has liability for Intangibles tax under s. 199.012, Florida Statutes       Yes       No

2. Principal Place of Business      2a. Mailing Address  
 21 Suite, Apt. #, etc.      26 Suite, Apt. #, etc.  
 22 City & State      27 City & State  
 23 Zip      Country      28 Zip      Country  
 24      25      29      30

9. Name and Address of Current Registered Agent  
**MANNING, T. D.**  
**1134 BLANDING BLVD.**  
**ORANGE PARK FL 32065**

10. Name and Address of New Registered Agent  
 81 Name  
 82 Street Address (P.O. Box Number is Not Acceptable)  
 83  
 84 City      FL      85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	MANNING, T. D.
STREET ADDRESS	1134 BLANDING BLVD.
CITY - ST - ZIP	ORANGE PARK FL
TITLE	TD
NAME	BLACK, FREDERICK E.
STREET ADDRESS	432 LA PAZ AVE
CITY - ST - ZIP	ORANGE PARK FL
TITLE	SD
NAME	DOWNARD, BOB
STREET ADDRESS	2251 DAISY COURT
CITY - ST - ZIP	MIDDLEBURG FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: T. D. Manning      Date: June 20, 1995      (904) 272-1017  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytona Florida 2

CR2E037 (3/95)