

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 02, 2008 8:00 am
Secretary of State

05-02-2008 90126 047 ****61.25

DOCUMENT # 736799

1. Entity Name

VICTORY BAPTIST CHURCH OF MILTON, FLORIDA,
INC.



Principal Place of Business

4000 AVALON BLVD.
MILTON FL 32583
US

Mailing Address

P. O. BOX 766
MILTON FL 32572-0766
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number
59-6598018

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

-FELLURE, TIMOTHY J
6641 DALISA ROAD
MILTON FL 32583

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

Tim Fellure

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature not required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE TRD
NAME JEFFERSON, JON
STREET ADDRESS 5725 NORTH RUP ROAD
CITY- ST- ZIP MILTON FL 32570 ☐ Delete

TITLE TRU
NAME BERG, ALBERT J
STREET ADDRESS 4855 JENNIFER DR.
CITY- ST- ZIP PACE FL 32571 ☐ Delete

TITLE TR
NAME ANDREWS, JEFF
STREET ADDRESS 4699 CERNY RD
CITY- ST- ZIP PENSACOLA FL 32526 ☐ Delete

TITLE TR
NAME PEARSON, DOUG
STREET ADDRESS 5098 HAMILTON BRIDGE RD
CITY- ST- ZIP PACE FL 32571 ☒ Delete

TITLE P
NAME FELLURE, TIM
STREET ADDRESS 6460 BAY OAKS DRIVE
CITY- ST- ZIP MILTON FL 32583 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PR
NAME BOB EDES
STREET ADDRESS 6260 FOXGLOVE ROAD
CITY- ST- ZIP MILTON, FL 32570 ☐ Change ☒ Addition

TITLE TR
NAME MIKE MUELLER
STREET ADDRESS 6363 HONEYCREEK DRIVE
CITY- ST- ZIP MILTON, FL 32570 ☐ Change ☒ Addition

TITLE TR
NAME MARK YOREY
STREET ADDRESS 5070 HAMILTON BRIDGE ROAD
CITY- ST- ZIP PACE, FL 32571 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Tim Fellure PASTOR

3/11/08

850-623-0086