1999

1. Corporation Name

P.O. BOX 973 **INVERNESS FL 34450**

DOCUMENT # 750254

VICTORY BAPTIST CHURCH OF INVERNESS, INC.



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

INVERNESS FL 34450

DIVISION OF CORPORATIONS

FILED Mar 11, 1999 8:00 am § Secretary of State

03-11-1999 90108 009 ****61.25

Principal Place of Business	Mailing Address	
SHSDY ACRE DR.	SHSDY ACRE DR.	A SERVICA SERVICA ROMANA BERNARA MARKAK BANTAN RABBIL BIRDIK BIRDIK BANTAN RABBILA BIRDIK BANTAN BANTAN BANTAN
P.O. BOX 973 INVERNESS EL 34450	P.O. BOX 973 INVERNESS FL: 34450	

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2.	Principal Place of Business	2a.	Mailing Address	3.	Date Incorporated or Qualifed		-
21		26		1	12/18/1979		
-	Suite, Apt. #, etc.		Suite, Apt. #, etc.	4.	FEI Number		Applied For
22		27			59-2613080		Not Applicable
	City & State		City & State	5.	Certificate of Status Desired		5 Additional Required
23	Zip Country	28	Zip Country	6.	Election Campaign Financing	\$5.	00 May Be
24	25	29	30		Trust Fund Contribution		ted to Fees
Name and Address of Current Registered Agent				10.	Name and Address of New Registered	Agent	

	81 Name	
visscher, edward 7645 E. Shore dr.	82 Street Address (P.O. Box Number is Not Acceptable)	
INVERNESS FL 34450	83	
	84 City 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.

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SIGNATURE	Signature, typed or printed name of registered agent and title if a	nolicable /NOTE: Re	gistered Agent signature re	outred when reinstating)	DATE	[
12.	OFFICERS AND DIREC	<u> </u>	13.	ADDITIONS/CHANGES TO OFFICE		RS IN 12
TITLE	D ST TOERS AND BINES	DELETÉ	1.1 TITLE	D Tr	Change	Addition
NAME	LOTT, CALVIN		1.2 NAME	STILTS, RAY		
STREET ADDRESS			1.3 STREET ADDRESS	2861 N. Kent St.		Ì
CITY-ST-ZIP	INERNESS FL 34453		1.4 CITY-ST-ZIP	HERNANDO, Fl. 32642		
TITLE	D	₹ DELETE	2.1 TITLE	VC T	₩ Change	☐ Addition
NAME	LINDSKOG, CARL		2.2 NAME	GODDARD, BERNARD		
STREET ADDRESS	l		2.3 STREET ADDRESS	6149 E. Malverna St.		
CITY-ST-ZIP	INVERNESS, FL 00000		2. 4 CITY-ST-ZIP	Inverness, Fl. 34453		
TITLE	D	☐ DELETE	3.1 TITLE		☐ Change	☐ Addition
NAME	VISSCHER, EDWARD		3.2 NAME			
STREET ADDRESS	7645 E. SHORE DR.		3.3 STREET ADDRESS			
CITY-ST-ZIP	INVERNESS FL 34450		3.4. CITY-ST-ZIP			
TITLE		DELETE	4,1 TITLE		☐ Change	Addition
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		☐ Change	☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP		11	5.4 CITY-ST-ZIP			
TITLE		D€LETE	6.1 TITLE		☐ Change	☐ Addition ·
NAME			6.2 NAME			,
STREET ADDRESS			6.3 STREET ADDRESS			
CITY ST. 7ID			6.4 CITY-ST-ZIP			Ĭ

14. 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 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, with all other like empowered.

EDWARD VISSCHER

SIGNATURE:

Mar: 19, 1999 352-637-0986

Date

Daytime Phone #