

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754474

FILED  
Feb 27, 2006  
Secretary of State

Entity Name: VICTORY CHRISTIAN FAMILY CENTER, INC.

**Current Principal Place of Business:**

8200 BEE RIDGE RD.  
SARASOTA, FL 34241

**New Principal Place of Business:**

**Current Mailing Address:**

8200 BEE RIDGE RD.  
SARASOTA, FL 34241

**New Mailing Address:**

FEI Number: 59-2091517      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

OWENS, MARY  
8200 BEE RIDGE ROAD  
SARASOTA, FL 34241      US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: OWENS, MARY,  
Address: 6512 93RD STREET, EAST  
City-St-Zip: BRADENTON, FL

Title: SEC ( ) Delete  
Name: OWENS, MARYBETH,  
Address: 6512 93RD ST. E.  
City-St-Zip: BRADENTON, FL

Title: VP ( ) Delete  
Name: ZIRKLE, MARION  
Address: 1700 S ASPEN  
City-St-Zip: BROKEN ARROW, OK

Title: VP ( ) Delete  
Name: WOLMERANS, THEODORE  
Address: 18160 N. US HWY 281  
City-St-Zip: SAN ANTONIO, TX

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: EVP (X) Change ( ) Addition  
Name: OWENS, MARYBETH,  
Address: 6512 93RD ST. E.  
City-St-Zip: BRADENTON, FL

Title: VP (X) Change ( ) Addition  
Name: ZIRKLE-WRIGHT, MARION  
Address: 1700 S ASPEN  
City-St-Zip: BROKEN ARROW, OK

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP ( ) Change (X) Addition  
Name: FRED, HODGES  
Address: 2303 MERRIL HILLS  
City-St-Zip: HOUSTON, TX 77450

Title: SEC ( ) Change (X) Addition  
Name: JENNIFER, CHRISTMAN  
Address: 4716 SAN JOSE DR.  
City-St-Zip: SARASOTA, FL 34235

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARY OWENS

PD

02/27/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date