

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000004329

**FILED**  
**Apr 16, 2010**  
**Secretary of State**

**Entity Name:** VICTORY CHRISTIAN TEACHING MINISTRIES, INC.

**Current Principal Place of Business:**

445 SW ALACHUA AVE  
LAKE CITY, FL 32025

**New Principal Place of Business:**

**Current Mailing Address:**

475 SW BRODERICK DRIVE  
LAKE CITY, FL 32025

**New Mailing Address:**

445 SW ALACHUA AVE  
LAKE CITY, FL 32025

**FEI Number:** 59-3427308

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MERRICKS, ELAINE REV.  
475 SW BRODERICK DRIVE  
LAKE CITY, FL 32025 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  
Name: MERRICKS, ELAINE REV.  
Address: RT. 10 BOX 526Y  
City-St-Zip: LAKE CITY, FL 32025

Title: T  
Name: CORVIN, BETTY  
Address: 754 NW ALMA AVE.  
City-St-Zip: LAKE CITY, FL 32055

Title: S  
Name: BELL, JOYCE  
Address: 418 THOMPkins LOOP  
City-St-Zip: LAKE CITY, FL 32055

Title: BM  
Name: MERRICKS, TELICIA E  
Address: 475 SW BRODERICK DR.  
City-St-Zip: LAKE CITY, FL 32025

I hereby 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 all other like empowered.

**SIGNATURE:** REV.EALINE MERRICKS

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04/16/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date