

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006465

FILED
Apr 27, 2011
Secretary of State

Entity Name: TREASURE COAST VICTORY CENTER, INC.

Current Principal Place of Business:

3212 S US HWY 1
STES 2-6
FORT PIERCE, FL 34982

New Principal Place of Business:

3212 S US HWY 1
STES 2 THROUGH 6
FORT PIERCE, FL 34982 US

Current Mailing Address:

PO BOX 2335
STUART, FL 349952335

New Mailing Address:

PO BOX 2335
STUART, FL 349952335 US

FEI Number: 65-1048919

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS, JEFFREY F
1950 SW CRANE CREEK AVE
PALM CITY, FL 34990 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: DP
Name: KEHRES, THOMAS
Address: 501 NW CORNELL AVE
City-St-Zip: PORT ST LUCIE, FL 34983

Title: DV
Name: KEHRES, REBECCA
Address: 501 NW CORNELL AVE
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: DST
Name: LAZARIDES, MARY S
Address: 183 SE EASY ST
City-St-Zip: STUART, FL 34994

Title: D
Name: CORDERO, WILFREDO
Address: 2119 SE LUCCA STREET
City-St-Zip: PORT ST LUCIE, FL 34952

Title: D
Name: THOMAS, JEFFREY F
Address: 1950 SW CRANE CREEK AVE
City-St-Zip: PALM CITY, FL 34990

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: MARY S. LAZARIDES

DST

04/27/2011

Electronic Signature of Signing Officer or Director

Date