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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Jan 22 1998 8:00am  
Secretary of State

DOCUMENT # **N01955** (6)

1. Corporation Name

**VICTORY FREE WILL BAPTIST CHURCH OF AUBURDALE,  
FLORIDA, INC.**



Principal Place of Business

**16 NORMAN LANE  
AUBURDALE FL 33823**

Mailing Address

**16 NORMAN LANE  
AUBURDALE FL 33823**

3. Date Incorporated or Qualified

**03/15/1984**

4. FEI Number

**59-2760341**

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GUY, JOHN  
607 LIME ST  
AUBURDALE FL 33823**

81 Name

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

83

84 City

**FL**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE

NAME **GUY, JOHN**  
STREET ADDRESS **607 LIME ST**  
CITY-ST-ZIP **AUBURDALE FL**

TITLE **VD** ☐ DELETE

NAME **JONES, DELMAR A.**  
STREET ADDRESS **3529 E. TRAPNELL ROAD**  
CITY-ST-ZIP **PLANT CITY FL**

TITLE **D** ☐ DELETE

NAME **GRANT, FRED**  
STREET ADDRESS **105 SMITH ST.**  
CITY-ST-ZIP **AUBURDALE FL**

TITLE **D** ☐ DELETE

NAME **HICKS, EDDY**  
STREET ADDRESS **107 DAVIS ST**  
CITY-ST-ZIP **AUBURDALE FL**

TITLE **S** ☐ DELETE

NAME **GUY, MARILYN**  
STREET ADDRESS **607 LIME STREET**  
CITY-ST-ZIP **AUBURDALE FL**

TITLE **T** ☒ DELETE

NAME **OUSLEY, RICHARD**  
STREET ADDRESS **143 OLEANDAR ST.**  
CITY-ST-ZIP **AUBURDALE FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

**TREASURER**  
**TINA COOK**  
**650 E. PIERCE ST.**  
**LAKE ALFRED-FL. 33850**

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.

SIGNATURE: **John G. Guy** **REQUIRED**

**January 7-98** **941-967-1939**

CR2E037 (10/97)