

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2005 08:00 AM
Secretary of State

DOCUMENT # N02000001412

1. Entity Name
VICTORY BAPTIST CHURCH OF CITRA, INC.



Principal Place of Business
3760 NE 175TH ST. RD.
CITRA, FL 32113

Mailing Address
3760 NE 175TH ST. RD.
CITRA, FL 32113



01262005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
75-3047432

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

STANLEY, JAMES E
3760 NE 175TH ST. RD.
CITRA, FL 32113

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
D
PALPANT, PIERRE R
537 NE 18TH AVE.
OCALA, FL 34470

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
D
MCDOWELL, DAVID
320 NE 189TH LN.
CITRA, FL 32113

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
D
HUTCHINSON, JENNIFER
1633 NE HWY 301
HAWTHORNE, FL 32640

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
D
STANLEY, CHAD
11145 NE 145TH ST.
FORT MC COY, FL 32134

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

11000000279756
03/29/05-80009-010 61.25

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jennifer Hutchinson - Secretary 3/28/05 (352) 236-0711
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR