

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001467

Entity Name: VICTORY IN VIEW, INC.

FILED
Mar 28, 2006
Secretary of State

Current Principal Place of Business:

725 S. RONALD REAGAN BLVD.
SUITE # 105
LONGWOOD, FL 32750 US

New Principal Place of Business:

Current Mailing Address:

725 S. RONALD REAGAN BLVD.
SUITE # 105
LONGWOOD, FL 32750 US

New Mailing Address:

FEI Number: 20-0984793

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCKNIGHT- GAY, DUCHESS VP
2849 BOTANY PL.
TALLAHASSEE, FL 32301 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: P () Delete
Name: MCKNIGHT, W. B.
Address: 5000 NEW BEDFORD PLACE #318
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: VP () Delete
Name: MCKNIGHT-GAY, DUCHESS
Address: 2849 BOTANY PLACE
City-St-Zip: TALLAHASSEE, FL 32301 US

Title: M () Delete
Name: MCKNIGHT, ERROLL
Address: 5000 NEW BEDFORD PLACE #318
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: T () Delete
Name: GRAHAM, DANA
Address: 9536 LAKE DOUGLAS PLACE
City-St-Zip: ORLANDO, FL 32817 US

Title: T () Delete
Name: ALLEN, RITA
Address: 1111 AUDOBON WAY
City-St-Zip: MAITLAND, FL 32751 US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: M () Change (X) Addition
Name: MCKNIGHT, COREY D
Address: 5000 NEWBEDFORD PLACE
City-St-Zip: WINTER SPRINGS, FL 32708

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: WILBUR B.MCKNIGHT

P

03/28/2006

Electronic Signature of Signing Officer or Director

Date