

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009782

FILED
Jun 02, 2009
Secretary of State

Entity Name: VICTORY @ SARASOTA, INC.

Current Principal Place of Business:

4776 BREEZY PINES BLVD
SARASOTA, FL 34232

New Principal Place of Business:

Current Mailing Address:

PO BOX 50833
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 65-1234700 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

GIBBS, BRIAN
4776 BREEZY PINES BLVD
SARASOTA, FL 34232 US

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 () Delete
Name: GIBBS, BRIAN D
Address: 4776 BREEZY PINES BLVD
City-St-Zip: SARASOTA, FL 34232

Title: V () Delete
Name: THOMAS, DAVID L
Address: 7869 EASTBROOKE TRAIL
City-St-Zip: POLAND, OH 44514

Title: S () Delete
Name: HAGAMAN, TONY
Address: 4348 PASADENA CIRCLE
City-St-Zip: SARASOTA, FL 34233

Title: D () Delete
Name: PANAGIOTOU, PETE
Address: 3143 BERNADETTE LANE
City-St-Zip: SARASOTA, FL 34234

Title: T () Delete
Name: FADER, CHETT
Address: 4171 BANBURY CIR
City-St-Zip: PARRISH, FL 34219

Title: D () Delete
Name: DAVID, WINDHORN
Address: 2650 COCONUT BAY LN #1B
City-St-Zip: SARASOTA, FL 34237

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: PANAGIOTOU, PETE
Address: 3143 BERNADETTE LANE
City-St-Zip: SARASOTA, FL 34234

Title: D (X) Change () Addition
Name: EVANS, RUSTY
Address: 690 EASTPOINTE PKWY
City-St-Zip: SARASOTA, FL 34232

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

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

I hereby certify that the information supplied with this filing does not qualify 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: BRIAN GIBBS

PD

06/02/2009

Electronic Signature of Signing Officer or Director

Date