

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000003315

FILED  
Apr 10, 2012  
Secretary of State

**Entity Name:** VICTORY RESTORATION REFUGE, INC.

**Current Principal Place of Business:**

100 STATE ROAD 60 W  
LAKE WALES, FL 33853

**New Principal Place of Business:**

**Current Mailing Address:**

6030 WASHINGTON AVENUE  
LAKE WALES, FL 33853

**New Mailing Address:**

**FEI Number:** 26-4543059

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COURTNEY, KATHLEEN  
6030 WASHINGTON AVE  
LAKE WALES, FL 33853 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:** COURTNEY, KATHLEEN  
**Address:** 6030 WASHINGTON AVE  
**City-St-Zip:** LAKE WALES, FL 33853

**Title:** DV  
**Name:** RUSSELL, SHAWN L  
**Address:** 934 OXFORD WAY  
**City-St-Zip:** LAKE WALES, FL 33853

**Title:** DST  
**Name:** COURTNEY, ALICIA L  
**Address:** 302 MARTIN LUTHER KING BLVD  
**City-St-Zip:** LAKE WALES, FL 33853

**Title:** DS  
**Name:** RUSSELL, KIMBERLY  
**Address:** 934 OXFORD WAY  
**City-St-Zip:** LAKE WALES, FL 33853

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:** KATHLEEN COURTNEY

DP

04/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date