

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **N12832** (4)

1. Corporation Name

CHRIST'S VICTORY TEMPLE, INC.



Principal Place of Business

**411 7TH ST. EAST
BRADENTON FL 34208**

Mailing Address

**411 7TH ST. EAST
BRADENTON FL 34208**

3. Date Incorporated or Qualified
12/31/1985

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

21 5710 19th St. W.

2a. Mailing Address

26 5710 19th St. W.

4. FEI Number
59-2620319

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

City & State

23 Bradenton, FL

City & State

28 Bradenton, FL

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

Zip

24 34207

Country

25 Manatee

Zip

29 34207

Country

30 Manatee

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**COCHRAN, GARY
2102 19TH ST W
BRADENTON FL 34205**

10. Name and Address of New Registered Agent

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 **DP** ☐ DELETE
NAME **SAVOY, ROGER M**
STREET ADDRESS **2535 9TH AVE W**
CITY - ST - ZIP **BRADENTON FL**

TITLE **DT** ☐ DELETE
NAME **COCHRAN, GARY**
STREET ADDRESS **2102 19TH ST W.**
CITY - ST - ZIP **BRADENTON FL**

TITLE **DS** ☐ DELETE
NAME **SAVOY, ELAINE C.**
STREET ADDRESS **2531 9TH AVE. W.**
CITY - ST - ZIP **BRADENTON FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

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

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Gary Cochran **GARY COCHRAN**

5-12-96

Date

Daytime Phone #

CR2E037 (12/95)