

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **N13416** (5)
1. Corporation Name
VICTORY CHRISTIAN CENTER OF ST. PETERSBURG, INC.

APPROVED
AND
FILED
95 APR 17 PM 4:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
**4751 46TH AV. N.
ST. PETERSBURG FL 33714
US** **P. O. BOX 41691
ST PETERSBURG FL 33743-1691
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **02/13/1986** 3a. Date of Last Report **04/21/1994**
4. FEI Number **58-1655976** Applied For
Not Applicable

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. **26** Suite, Apt. #, etc.
22 City & State **27** City & State
23 Zip **28** Zip
24 Country **29** Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ **\$68.75 Supplemental Fee Not Required**
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
**RUSSO, PATRICK
6631 12TH TERRACE NORTH
ST. PETERSBURG FL 33710**

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when registering) DATE _____

12. OFFICERS AND DIRECTORS
TITLE **PD**
NAME **RUSSO, PATRICK**
STREET ADDRESS **6631 12TH TERR N.**
CITY-ST-ZIP **ST. PETERSBURG FL**
TITLE **STD**
NAME **RUSSO, CHRISTINE**
STREET ADDRESS **6631 12TH TERR N.**
CITY-ST-ZIP **ST. PETERSBURG FL**
TITLE **D**
NAME **TANNEHILL, STEVE**
STREET ADDRESS **4033 22ND AVENUE N**
CITY-ST-ZIP **S. PETERSBURG FL**
TITLE **D**
NAME **FREEMAN, CAROLYN**
STREET ADDRESS **4100 28TH AVE N.**
CITY-ST-ZIP **ST PETERSBURG FL**

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 110.07(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: *Christine Russo* **CHRISTINE RUSSO** **4/12/95** **813-522-5528**
Signature and Typed or Printed Name of Signing Officer or Director Date Signature Number