## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name N13416

(5)

VICTORY CHRISTIAN CENTER OF ST. PETERSBURG, INC.

Principal Place of Business Mailing Address 5000 42NO P. O. BOX 41691 ST. PETERSBURG FL 83714" ST PETERSBURG FL 33743-1691 3. Date Incorporated or Qualified 3a. Date of Last Report 02/13/1986 02/05/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 58-1655976 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8,75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name RUSSO, PATRICK Street Address (P.O. Box Number is Not Acceptable) 6631 12TH TERRACE NORTH 83 ST. PETERSBURG FL 33710 **B4** 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and little if applicable DAYE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE PD 1.1 TITLE RUSSO, PATRICK NAME 12 NAME 8631 12TH TERR N 1.3 STREET ADDRESS STREET ADDRESS ST. PETERSBURG FL CITY - ST - ZIP 1.4 C/IY - ST - ZIP DELETE Change \_\_\_ Addition 2.1 TITLE TITLE RUSSO, CHRISTINE 2.2 NAME NAME 6631 12TH TERR N. STREET ADDRESS 2.3 STREET ADDRESS ST. PETERSBURG FL 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 3.1 TITLE Change ☐ Addition TITLE TANNEHILL, STEVE 3.2 NAME NAME 4033 22ND AVENUE N 3.3 STREET ADDRESS STREET ADDRESS S. PETERSBURG FL 3.4. CITY - ST - ZIP CITY-ST-ZIP Addition DELETE 4.1 TITLE ☐ Change TITLE D FREEMAN, CAROLYN 4. 2 NAME NAME 4100 29TH AVE N. 4.3 STREET ADDRESS STREET ADDRESS ST PETERSBURG FL 4.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition 5 1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS

14. If do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 eath; 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.

5.4 CITY - ST - ZIP

**6.3 STREET ADORESS** 6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-2IP

CITY-ST-7IP

TITLE NAME

DELETE

**FILED** 

May 08 1997 8:00am

Secretary of State

Daytime Phone # 0051487

Change

Addition