

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2003 8:00 am
Secretary of State

04-16-2003 90126 038 ****61.25

DOCUMENT # N13738

1. Entity Name

VICTORY WORSHIP CENTER, INC.



Principal Place of Business

VICTORY WORSHIP CENTER, INC.
6637 COUNTY LINE RD.
PLANT CITY FL 33567
US

Mailing Address

VICTORY WORSHIP CENTER, INC.
6637 COUNTY LINE RD.
PLANT CITY FL 33567
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2509313**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BASS, HOWARD
5803 LEGACY CRESCENT PL.
APT 204
RIVERVIEW FL 33569

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BASS, HOWARD 5803 LEGACY CRESCENT PL. RIVERVIEW FL 33569	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GONZALEZ, STEVE 2001 HOLLOWAY RD PLANT CITY FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHROYER, BOB 4327 MEIBROOK CT LAKELAND FL 33813	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT DANIELS, PAUL 520 CHESTER DR LAKELAND FL 33803	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Howard L. Bass 1123 Coward Rd. Plant City, FL 33567	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT EARLEEN MAXWELL 2413 Sundance Circle Mulberry, FL 33860	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

Howard L. Bass 4/10/03

813-754-

CR2E037 (10/02)