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FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Apr 22, 2002 8:00 am Secretary of State **DOCUMENT # N41372** 1. Entity Name VICTORY COMMUNITY CHURCH, INC. 04-22-2002 90269 022 ****61.25 Principal Place of Business Mailing Address 10730 102 AVE 10730 102 AVE SEMINOLE FL 33778 01101000 SEMINOLE FL 33778 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For NOT APPLICABLE Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namé Street Address (P.O. Box Number is Not Acceptable) **BLANCO, SALVATORE** 13400 PERIWINKLE AVE SEMINOLE FL 33776 City Zip Code FL 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) ţ DATE 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 Make Check Payable to \$5.00 May Be ŝ Trust Fund Contribution. П Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 VPT TITLE ☐ Delete TITLE Change ☐ Addition HERN, JAMES NAME NAME STREET ADDRESS 9961 132ND WAY NORTH STREET ADDRESS CITY-ST-ZIP **LARGO FL 33773** CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME **BLANCO, SALVATORE** NAME 13400 PERIWINKKLE AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SEMINOLE FL 33776 CITY-ST-ZIP ☐ Delete . — . TITLE ☐ Change ☐ Addition BLANCO, LAVERA NAME NAME STREET ADDRESS 13400 PERIWINKLE AVENUE STREET ADDRESS CITY-ST-ZIF SEMINOLE FL 33776 CITY-ST-ZIP TITLE **⊠** Delete TITLE ☐ Change Addition FRANQUEIRO, HELEN NAME NAME STREET ADDRESS 9961 132 WAY N STREET ADDRESS CITY-ST-ZIP LARGO FL 33773 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition HERN, HELEN NAME NAME STREET ADDRESS 9961 132ND WAY NORTH STREET ADDRESS CITY-ST-ZIP LARGO FL 33773 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

12. I hereby certify that the information supplied with this filling 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:

F SIGNING OFFICER OR DIRECTOR Blanco 4)10/02 727-391-3397