

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **N94000002840 (6)**

1. Corporation Name

VICTORY CHURCH OF LORD JESUS CHRIST INC.

Principal Place of Business

**1068 W. 28TH ST.
RIVIERA BEACH FL 33404**

Mailing Address

**1068 W. 28TH ST.
RIVIERA BEACH FL 33404**



3. Date Incorporated or Qualified
06/06/1994

3a. Date of Last Report
08/15/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number

NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

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

9. Name and Address of Current Registered Agent

**CAMPBELL, URIAH
1068 W. 28TH ST.
RIVIERA BEACH FL 33404**

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 date (if applicable)

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME **P CAMPBELL, URIAH**
STREET ADDRESS **410 W. 36 ST.**
CITY-STATE-ZIP **RIVIERA BEACH FL 33404**

TITLE ☐ DELETE
NAME **T SPRINGER, SHEILA**
STREET ADDRESS **800 W 38 CT**
CITY-STATE-ZIP **W. PALM BEACH FL 33406**

TITLE ☐ DELETE
NAME **S BROWN, ULALEE**
STREET ADDRESS **410 W. 36 ST.**
CITY-STATE-ZIP **RIVIERA BEACH FL 33404**

TITLE ☐ DELETE
NAME **V CAMPBELL, THELMA J**
STREET ADDRESS **410 W 36TH STREET**
CITY-STATE-ZIP **RIVIERA BEACH FL 33404**

TITLE ☐ DELETE
NAME **T WILKINSON, ERWIN**
STREET ADDRESS **231 HURON PL**
CITY-STATE-ZIP **WEST PALM BEACH FL 33409**

TITLE ☐ DELETE
NAME **T MINOTT, DOLORES**
STREET ADDRESS **1400 VILLAGE BLVD.**
CITY-STATE-ZIP **WEST PALM BEACH FL 33409**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

111E ☐ Change ☐ Addition
121E
131E
141E-STATE-ZIP

21E ☐ Change ☐ Addition
221E
231E
241E-STATE-ZIP

31E ☐ Change ☐ Addition
32E
331E
341E-STATE-ZIP

41E ☐ Change ☐ Addition
42E
431E
441E-STATE-ZIP

51E ☐ Change ☐ Addition
52
531E
541E-STATE-ZIP

61E ☐ Change ☐ Addition
62
631E
641E-STATE-ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Uriah Campbell

Date

Telephone

CR2E037 (12/95)