

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT



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

19965-1-96 B-6257C

DOCUMENT # N95000001174 (0)

1. Corporation Name

VICTOR T. CURRY MINISTRIES, INC.



Principal Place of Business

13230 N.W. 7TH AVENUE  
MIAMI FL 33168

Mailing Address

13230 N.W. 7TH AVENUE  
MIAMI FL 33168

3. Date Incorporated or Qualified  
03/13/1995

3a. Date of Last Report

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number  
65-0572488

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

WILLIAMS, VERNITA C  
9970 N.W. 51ST LANE  
MIAMI FL 33178

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

*Vernita C. Williams*

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

(NOTE: Registered Agent signature required when reinstating)

*April 26, 1996*

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE  
NAME CURRY, VICTOR T  
STREET ADDRESS 13230 N.W. 7TH AVE.  
CITY-ST-ZIP MIAMI FL 33178

TITLE D ☒ DELETE  
NAME CURRY, CATHY  
STREET ADDRESS 13230 N.W. 7TH AVE.  
CITY-ST-ZIP MIAMI FL 33178

TITLE D ☐ DELETE  
NAME ASHLEY, JULIE  
STREET ADDRESS 13230 N.W. 7TH AVE.  
CITY-ST-ZIP MIAMI FL 33178

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Director ☐ Change ☒ Addition  
1.2 NAME Barbara Forde  
1.3 STREET ADDRESS 102 Forrest Park Avenue  
1.4 CITY-ST-ZIP Temple Terrace FL 33617

2.1 TITLE Director ☐ Change ☒ Addition  
2.2 NAME Charlotte Allen  
2.3 STREET ADDRESS 2210 NW 44 Ave  
2.4 CITY-ST-ZIP Ft. Lauderdale FL 33313

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 119.07(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:

*Victor T. Curry*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*4/26/96*

Date

*685-3700*

Daytime Phone #

CR2E037 (12/95)