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**

N95000004114 (3) DOCUMENT

VICTORY CHRISTIAN SCHOOL, INC.

Mailing Address Principal Place of Business 3001 NORTH 29TH AVENUE 3001 NORTH 29TH AVENUE HOLLYWOOD FL 33020-1309 HOLLYWOOD FL 33020-1309 3. Date Incorporated or Qualified 08/28/1995 3a. Date of Last Report 03/07/1996 2. Principal Place of Business Mailing Address 4. FEI Number Applied For NOT APPLICABLE Not Applicable 26 21 Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional \mathbf{Z} 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 29 30 Florida Statutes 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name 81 THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD Street Address (P.O. Box Number is Not Acceptable) 343 ALMERIA AVENUE 83 CORAL GABLES FL 33134 AA 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 title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. Addition DELETE Change THILE **PSTD** 11 TITLE NAME FLETCHER, CLAUDETTE Y M.DIV 1.2 NAME 3001 NORTH 29TH AVENUE 1.3 STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 33020-1309 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ✓ Change Addition TITLE 2.1 TITLE BROWN, PASTOR DEVON beown, pastor druon 2.2 NAME NAME BOOI NORTH 29TH AUBNUE 3001 NORTH 29TH AVENUE 2.3 STREET ADDRESS STREET ADDRESS FL 83020 - 1309 HOLLYWOOD FL 33020-1309 HOWHMOOD, 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE ✓ Change 3.1 TITLE TITLE HENRY, ZADOC HENRY, ZADOC 3.2 NAME NAME BOOI NORTH 29 TH AVBNUS 3001 NORTH 29TH AVENUE 3.3 STREET ADDRESS STREET ADDRESS HOLLYWOOD , FL 33020-1309 HOLLYWOOD FL 33020-1309 3.4. CITY-ST-ZIP CITY - ST - ZIP Addition ☐ DELETE Change 4.1 TITLE TITLE DONALDSON, JENNIFER NAME 4. 2 NAME 1230 orleans steret 4.3 STREET ADDRESS STREET ADDRESS MIRMAR, FL 33028 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE NAME 5.2 NAME BHERY- AUSTIN, TRINITA 5.3 STREET ADDRESS 3032 NW 194TH THEE STHEET ADDRESS 5.4 CITY-ST-ZIP CAROL CITY, PL 83055 CITY-ST-ZIP Change Addition DELETE TITLE 6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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 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:

NAME

STREET ADDRESS

CITY-ST-ZIP

FLITTLANUAL BEAULIFIE DEGTONE

HENEY, DORMAN

11301 BOCKINGHOPSE ED

COOPER CITY, PA \$3025

(954)929-3411 Daytime Phone # 0021276

FILED

May 20 1997 8:00am

Secretary of State