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FILED

Mar 27 1998 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # N97000002462 (6)

1. Corporation Name

VICTORY FOR SOULS OUTREACH FOUNDATION, INC.

Principal Place of Business

Mailing Address

6155 S. FLORIDA AVE.  
SUITE 7  
LAKELAND FL 33813

6155 S. FLORIDA AVE.  
SUITE 7  
LAKELAND FL 33813

3. Date Incorporated or Qualified

04/30/1997

4. FEI Number

59-3473987

Applied For

Not Applicable

6. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐

Yes

☐

No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐

Yes

☐

No

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STRAWBRIDGE, VINCENT F SR.  
6155 S. FLORIDA AVE.  
SUITE 7  
LAKELAND FL 33813

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

Vincent F. Strawbridge SR.

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

(NOTE: Registered Agent signature required when reinstating)

3-24-98

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE  
NAME BAKER, DOROTHY  
STREET ADDRESS 1015 TIMBERLAND DRIVE  
CITY-ST-ZIP LAKELAND FL 33809

TITLE D ☐ DELETE  
NAME REED, GAIL  
STREET ADDRESS 1247 PARKER ROAD  
CITY-ST-ZIP LAKELAND FL 33811

TITLE D ☐ DELETE  
NAME SMITH, JOHN  
STREET ADDRESS 6127 EAST DONGEL  
CITY-ST-ZIP LAKELAND FL 33813

TITLE D ☐ DELETE  
NAME STRAWBRIDGE, TIM  
STREET ADDRESS 625 SCHOOLHOUSE ROAD  
CITY-ST-ZIP LAKELAND FL 33813

TITLE D ☐ DELETE  
NAME GILMORE, MELROSE  
STREET ADDRESS 625 SCHOOLHOUSE ROAD  
CITY-ST-ZIP LAKELAND FL 33813

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President ☐ Change ☐ Addition  
1.2 NAME VINCENT F. Strawbridge  
1.3 STREET ADDRESS 6155 S. FLA AVE #7  
1.4 CITY-ST-ZIP Lakeland, Fla. 33813

2.1 TITLE Vice President ☐ Change ☐ Addition  
2.2 NAME Ronald R. Reed  
2.3 STREET ADDRESS 6155 S. FLA. AVE #7  
2.4 CITY-ST-ZIP Lakeland, Fla. 33813

3.1 TITLE Vice President ☐ Change ☐ Addition  
3.2 NAME merriam Ellis  
3.3 STREET ADDRESS 6155 S. FLA. AVE #7  
3.4 CITY-ST-ZIP Lakeland, Fla 33813

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 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:

3-24-98 941-648-9970

CR2E037 (10/97)