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FILED
May 21 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 # N97000003498 (9)

1. Corporation Name

VICTORIOUS ROAD CHRISTIAN SCHOOL INC.



Principal Place of Business

Mailing Address

1479 ROSE BLVD.
ORLANDO FL 32839

1479 ROSE BLVD.
ORLANDO FL 32839

3. Date Incorporated or Qualified

06/16/1997

4. FEI Number

59-3469044

Applied For

Not Applicable

2. Principal Place of Business

21 5520 Marvell Ave.

Suite, Apt. #, etc.

22 Orlando

City & State

23 Orlando, FL

Zip

24 32839

Country

25 Orange

2a. Mailing Address

26 38848 Ella Drive

Suite, Apt. #, etc.

27

City & State

28 Lady Lake, FL

Zip

29 32159

Country

30 Lake

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$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

9. Name and Address of Current Registered Agent

CARNECCHIA, ROBIN-ANN
1479 ROSE BLVD.
ORLANDO FL 32839

10. Name and Address of New Registered Agent

81 Name

Robin-Ann Carnecchia

82 Street Address (P.O. Box Number is Not Acceptable)

38848 Ella Drive

83

84

City Lady Lake

FL

85 Zip Code 32159

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)

DATE

12. OFFICERS AND DIRECTORS

TITLE Administrator - D

☐ DELETE

NAME Robin-Ann Carnecchia

STREET ADDRESS 5520 Marvell Ave

CITY-ST-ZIP Orlando, FL 32839

TITLE Director of Admissions - D

☐ DELETE

NAME David P. Carnecchia

STREET ADDRESS 5520 Marvell Ave.

CITY-ST-ZIP Orlando, FL 32839

TITLE Student Advisor

☒ DELETE

NAME David Delgado

STREET ADDRESS 1481 Rose Blvd

CITY-ST-ZIP Orlando, FL 32839

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

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

Tester of Students - D

☐ Change

☒ Addition

Aileen J. Carnecchia

1086 Martin Blvd.

Orlando, FL 32825

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change

☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change

☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change

☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change

☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

☐ Addition

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:

Robin-Ann Carnecchia 4-19-98 352-323-8093

CR2E037 (10/97)