

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 01, 2006 8:00 am
Secretary of State

03-01-2006 90028 010 ****61.25

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1. Entity Name

VICTORY CATHEDRAL CHRISTIAN CENTER, INC.



Principal Place of Business

16110 HWY. 301 S.
WIMAUMA FL 33598

Mailing Address

PO BOX 5433
SUN CITY CENTER FL 33571

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-3345177

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BLOKLEY, G W REV
16110 HWY. 301 S
WIMAUMA FL 33598

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when renewing)

DATE

FILE NOW - FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME BLAKLEY, G W REV
STREET ADDRESS PO BOX 5433
CITY-ST-ZIP SUN CITY CENTER FL 33571

TITLE D ☒ Delete
NAME HASLACKER, DALE
STREET ADDRESS 1330 FM 2790 W
CITY-ST-ZIP LYTLE TX 78052

TITLE T ☐ Delete
NAME PETERS, JOSEPHINE
STREET ADDRESS 1554 TILLEY AVE
CITY-ST-ZIP CLEARWATER FL 33756

TITLE V ☐ Delete
NAME BLAKLEY, CHRIS
STREET ADDRESS 817 WOODLAWN STREET
CITY-ST-ZIP CLEARWATER FL 33756

TITLE D ☐ Delete
NAME BLAKLEY, VICKY
STREET ADDRESS 16110 HWY. 301 S.
CITY-ST-ZIP WIMAUMA FL 33598

TITLE D ☐ Delete
NAME RIORDAN, TERIANN
STREET ADDRESS 116 LAKESIDE DRIVE
CITY-ST-ZIP OLDSMAR FL 34677

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

G. W. BLAKLEY

815-642-0004
Jan. 30/06