

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2003 8:00 am
Secretary of State

05-16-2003 90182 043 ****61.25

0047060

DOCUMENT # N99000002688

1. Entity Name

VICTORY CATHEDRAL CHRISTIAN CENTER, INC.



Principal Place of Business

**1553 SCRANTON AVENUE
CLEARWATER FL 33756**

Mailing Address

**1553 SCRANTON AVENUE
CLEARWATER FL 33756**

2. Principal Place of Business

3. Mailing Address

16110 Hwy 301 S.

P.O. Box 5433

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Wimauma, FL

San City Center

City & State

City & State

Zip

Country

Zip

Country

33598

US

33571

US



☒ CHECK HERE IF MAKING CHANGES

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

7. Name and Address of New Registered Agent

**BLAKLEY, GARNET
1553 SCRANTON AVENUE
CLEARWATER FL 33756**

Name

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

16110 Hwy 301 S.

City

Wimauma

FL

Zip Code

33598

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 reinstating)

DATE

G.W. Blakley

Jan 20/03

FILE NOW: FEE IS \$61.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete
NAME **BLAKLEY, GARNET**
STREET ADDRESS **1553 SCRANTON AVENUE**
CITY-ST-ZIP **CLEARWATER FL 33756**

TITLE ☐ Change ☐ Addition
NAME **16110 Hwy 301 S.**
STREET ADDRESS **Wimauma, FL 33598**
CITY-ST-ZIP **33598**

TITLE **D** ☐ Delete
NAME **HASLACKER, DALE**
STREET ADDRESS **1330 FARM 2790**
CITY-ST-ZIP **LYTLE TX 78052**

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

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

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

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

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

TITLE ☐ Delete
NAME ☐ Delete
STREET ADDRESS ☐ Delete
CITY-ST-ZIP ☐ Delete

TITLE ☐ Change ☐ Addition
NAME **VICKY BLAKLEY**
STREET ADDRESS **16110 Hwy 301 S.**
CITY-ST-ZIP **Wimauma, FL 33598**

TITLE ☐ Delete
NAME ☐ Delete
STREET ADDRESS ☐ Delete
CITY-ST-ZIP ☐ Delete

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

12. 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 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:

REQUIRED

G.W. BLAKLEY (PRES.) 813-642-0004

CR2E037 (10/02)