


**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 05, 2005 08:00 AM
Secretary of State

DOCUMENT # N99000004271 1. Entity Name VICTORY COMMUNICATIONS, INC.	
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Principal Place of Business 371 S.W. 28TH TERRACE FORT LAUDERDALE, FL 33312 US	Mailing Address 371 S.W. 28TH TERRACE FORT LAUDERDALE, FL 33312 US
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06302005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0937706	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

STONOM, JANICE E
371 S.W. 28TH TERRACE
FORT LAUDERDALE, FL 33312

**DO NOT WRITE
IN THIS SPACE**

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

**Filing Fee is \$61.25
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

000000370747
07/05/05-80029-004 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STONOM, JANICE E 371 S.W 28TH TERRACE FORT LAUDERDALE, FL 33312
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KING, PHYLLIS J 371 S.W. 28TH TERRACE FORT LAUDERDALE, FL 33312
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STONOM, EVELYN L 371 S.W 28TH TERRACE FORT LAUDERDALE, FL 33312
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**DO NOT WRITE
IN THIS SPACE**

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 1.1 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Janice E Stonom*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JANICE E. STONOM 06/30/2005 (954) 791-2424

Date

Daytime Phone #