

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000021433

FILED
Apr 30, 2005
Secretary of State

Entity Name: VICTORY BOOKEEPING & TAX SERVICE, INC.

Current Principal Place of Business:

2236 LOOKING GLASS LANE
JACKSONVILLE, FL 32210

New Principal Place of Business:

1462 FLOYD CIRCLE
ORANGE PARK, FL 32073

Current Mailing Address:

2236 LOOKING GLASS LANE
JACKSONVILLE, FL 32210

New Mailing Address:

PO BOX 60903
JACKSONVILLE, FL 32236

FEI Number: 05-0551981

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUTLER, VICKIE K
2236 LOOKING GLASS LANE
JACKSONVILLE, FL 32210 US

Name and Address of New Registered Agent:

BUTLER, VICKIE K
PO BOX 60903
JACKSONVILLE, FL 32236 US

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.

SIGNATURE: VICKIE K BUTLER

04/30/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BUTLER, VICKIE K
Address: 2236 LOOKING GLASS LANE
City-St-Zip: JACKSONVILLE, FL 32210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BUTLER, VICKIE K
Address: PO BOX 60903
City-St-Zip: JACKSONVILLE, FL 32236

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VICKIE K BUTLER

P

04/30/2005

Electronic Signature of Signing Officer or Director

Date