

FILED
Apr 22, 2003 8:00 am
Secretary of State

04-22-2003 90042 025 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P94000016132

1. Entry Name
VICTORY ARTS, INC.



Principal Place of Business
5707 PINE AVENUE
ORANGE PARK, FL 32073

Mailing Address
5707 PINE AVENUE
ORANGE PARK, FL 32073

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

59-3228100

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DUKE, WILLIAM H
5707 PINE AVENUE
ORANGE PARK, FL 32073

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 entry 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 submitting)

DATE

FILE NUMBER: P94000016132
FILING DATE: APR 22, 2003
FILING TIME: 8:00 AM
FILING FEE: \$150.00
FILING TYPE: REGISTRATION OF CHANGE OF REGISTERED AGENT

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ Delete
PD	DUKE, MARILYN Y	5707 PINE AVENUE	ORANGE PARK, FL 32073	☐
STD	DUKE, WILLIAM H	5707 PINE AVENUE	ORANGE PARK, FL 32073	☐
				☐
				☐
				☐
				☐

TITLE	NAME	STREET ADDRESS	CITY-STATE-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)(1), 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 607, 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

Marilyn Y. Duke Marilyn Y. Duke

4/18/03

904-278-0007

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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