

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750254

Entity Name: VICTORY BAPTIST CHURCH OF INVERNESS, INC.**Current Principal Place of Business:**5040 SHADY ACRE DR.
INVERNESS, FL 34453**Current Mailing Address:**P.O. BOX 973
INVERNESS, FL 34451 US**FEI Number: 80-0384157****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GODDARD, BERNARD A
6149 E. MALVERNE ST.
INVERNESS, FL 34452 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	CTD
Name	GODDARD, BERNARD A
Address	6149 E MALVERNE ST.
City-State-Zip:	INVERNESS FL 34452

Title	D
Name	MCDONALD, PATRICIA S
Address	5387 S SHADY ACRE DR.
City-State-Zip:	INVERNESS FL 34453

Title	T
Name	O'BRIEN, SHIRLEY A
Address	8939 E TSALA APOPKA DR/
City-State-Zip:	INVERNESS FL 34450

Title	ASST. SECRETARY
Name	MOORE, EVELYN E
Address	144 N CEDARVIEW TERRACE
City-State-Zip:	INVERNESS FL 34453

Title	P
Name	MILLS, JAMES
Address	5040 SHADY ACRE DR. P.O. BOX 973
City-State-Zip:	INVERNESS FL 34453

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JAMES MILLS**P****04/29/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date