

**2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 728277

**FILED**  
**Apr 05, 2010**  
**Secretary of State**

**Entity Name:** VICTORY TABERNACLE CHURCH, INC.

**Current Principal Place of Business:**

527 WILLOW BRANCH  
VICTORY TABERNACLE  
JACKSONVILLE, FL 32254

**New Principal Place of Business:**

**Current Mailing Address:**

527 WILLOW BRANCH  
VICTORY TABERNACLE  
JACKSONVILLE, FL 32254

**New Mailing Address:**

**FEI Number:** 59-2527078      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NICHOLAS, LEBON A.  
2936 LENOX AVE.  
JACKSONVILLE, FL 32254      US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: NICHOLAS, LEBON A  
Address: 2936 LENOX AVE  
City-St-Zip: JACKSONVILLE, FL 32254

Title: VP  
Name: NICHOLAS, ANNIE Y  
Address: 2936 LENOX AVE  
City-St-Zip: JACKSONVILLE, FL 32254

Title: TD  
Name: JENKINS, PATRICIA F  
Address: 1010 MACKINAW ST  
City-St-Zip: JACKSONVILLE, FL 32254

Title: S  
Name: JENKINS, IRIS A  
Address: 1010 MACKINAW ST  
City-St-Zip: JACKSONVILLE, FL 32254

Title: D  
Name: NICHOLAS, JEROME W  
Address: 2792 SUNNYSIDE ST  
City-St-Zip: JACKSONVILLE, FL 32254

Title: D  
Name: BOATWRIGHT, DONTAVIES L  
Address: 2800 SOPHIA ST SUITE 6  
City-St-Zip: JACKSONVILLE, FL 32254

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: LEBON A. NICHOLAS

PD

04/05/2010

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date