2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728277

Entity Name: VICTORY TABERNACLE CHURCH, INC.

FILED
Jan 31, 2021
Secretary of State
2157336535CC

Current Principal Place of Business:

527 WILLOW BRANCH AVENUE VICTORY TABERNACLE JACKSONVILLE, FL 32254

Current Mailing Address:

527 WILLOW BRANCH AVENUE VICTORY TABERNACLE JACKSONVILLE, FL 32254

FEI Number: 59-2527078 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NICHOLAS, LEBON A. 2936 LENOX AVE. JACKSONVILLE, FL 32254 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 P Title V

NameNICHOLAS, LEBON ANameNICHOLAS, ANNIE YAddress2936 LENOX AVEAddress2936 LENOX AVE

City-State-Zip: JACKSONVILLE FL 32254 City-State-Zip: JACKSONVILLE FL 32254

Title T Title S, SECRETARY

NameJENKINS, PATRICIA FNameNICHOLAS, KANDACEAddress1010 MACKINAW STAddress2771 COLLEGE ST

City-State-Zip: JACKSONVILLE FL 32254 City-State-Zip: JACKSONVILLE FL 32205

Title D Title

 Name
 NICHOLAS, JEROME W
 Name
 NICHOLAS, TERRY L

 Address
 2792 SUNNYSIDE ST
 Address
 851 BENBOW STREET

 City-State-Zip:
 JACKSONVILLE FL 32254
 City State Zip: JACKSONVILLE FL 32205

City-State-Zip: JACKSONVILLE FL 32254 City-State-Zip: JACKSONVILLE FL 32209

Title SECRETARY

Name WOODARD, VANESSA

Address 1525 WINDLE STREET

City-State-Zip: JACKSONVILLE FL 32209

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 PRESIDENT 01/31/2021