

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003024

Entity Name: TRIUMPH CHURCH OF GOD, INC.**Current Principal Place of Business:**CORNER OF RIVER ROAD AND CARVER AVENUE
WEWAHITCHKA, FL 32465**Current Mailing Address:**P.O. BOX 1343 N/A
WEWAHITCHKA, FL 32465 US**FEI Number:** 59-3191613**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JACKSON, JOSEPH
CORNER OF RIVER ROAD AND CARVER AVENUE
WEWAHITCHKA, FL 32465 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 D
Name ROULHAC, JASON
Address 7508 SHADOW BAY DRIVE
City-State-Zip: PANAMA CITY FL 32404

Title D
Name JACKSON, SYLVIA
Address PO BOX 1343 N/A
City-State-Zip: WEWAHITCHKA FL 32465

Title D
Name JACKSON, MATTIE M
Address 7508 SHADOW BAY DRIVE
City-State-Zip: PANAMA CITY FL 32404

Title D
Name JACKSON, STEVE W
Address PO BOX 1003
City-State-Zip: WEWAHITCHKA FL 32465

Title D
Name JACKSON, JOSEPH L
Address P O BOX 1343
City-State-Zip: WEWAHITCHKA FL 32465

Title DS
Name JACKSON, LULA
Address 7508 SHADOW BAY DRIVE
City-State-Zip: PANAMA CITY FL 32404

Title D
Name JACKSON, ALLEN W
Address PO BOX 30007
City-State-Zip: PANAMA CITY FL 32404

Title D
Name JACKSON, SHIRLEY
Address 7508 SHADOW BAY DRIVE
City-State-Zip: PANAMA CITY FL 32404

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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: JOSEPH L JACKSON**PASTOR****04/03/2017**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title D
Name COLVIN, CHRIS D
Address PO BOX 32
City-State-Zip: WEWAHITCHKA FL 32465

Title OFFICER
Name MYERS, TERRY WAYNE
Address 5501 FRANK HUFF ROAD
City-State-Zip: PANAMA CITY FL 32404

Title D
Name MYERS, BARBARA A
Address PO BOX 520
City-State-Zip: WEWAHITCHKA FL 32465