## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 704000** 

FILED Apr 14, 2009 Secretary of State

Entity Name: VICTORY LIFE CHURCH SBC INC.

Current F	Principal Place	of Business:	New Principal Place	e of Business:
	12TH AVE. TON, FL 33325	j		
Current Mailing Address:		New Mailing Address:		
	12TH AVE. TON, FL 33325	;		
FEI Numbe	r: 59-6532448	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name an	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
4959 NW COCONL The above	JT CREEK, FL	33063 US	purpose of changing its registere	ed office or registered agent, or both,
0101117				
SIGNATU				
SIGNATU		iic Signature of Registered Ag	gent	Date
				Date BES TO OFFICERS AND DIRECTOR
<b>OFFICER</b> Title: Name: Address:	Electron  RS AND DIREC  D ( )  KORNEFF, WIL  5680 SW 3 PLA	TORS: Delete LIAM ACE #103		
OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	Electron  RS AND DIREC  D ()  KORNEFF, WIL  5680 SW 3 PL/  MARGATE, FL  D ()  CLIFFORD, KIM  11650 NW 43 8	TORS: Delete LLIAM ACE #103 33068 Delete //BERLY	ADDITIONS/CHANG Title: Name: Address:	SES TO OFFICERS AND DIRECTOR
	Electron  RS AND DIREC  D ( )  KORNEFF, WIL  5680 SW 3 PL  MARGATE, FL  D ( )  CLIFFORD, KIM  11650 NW 43 S  SUNRISE, FL S  D ( )  MORRISON, M.  7535 BANYAN	TORS: Delete LIAM ACE #103 33068 Delete MBERLY ST 33323 Delete ATTHEW	ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address:	SES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition
OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	Electron  RS AND DIREC  D ( )  KORNEFF, WIL  5680 SW 3 PL/ MARGATE, FL  D ( )  CLIFFORD, KIM 11650 NW 43 S SUNRISE, FL 3  D ( )  MORRISON, M.  7535 BANYAN' FORT LAUDER	TORS: Delete LIAM ACE #103 33068 Delete //BERLY ST 33323 Delete ATTHEW WAY DALE, FL 33321 Delete H D REV T CT.	ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address: City-St-Zip:  Title: Name: Address: Address: Address:	GES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition  ( ) Change ( ) Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RALPH CURTIN D 04/14/2009