

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720600

FILED
Aug 13, 2009
Secretary of State

Entity Name: VICTORY FELLOWSHIP MINISTRIES, INCORPORATED

Current Principal Place of Business:

13355 N.E. 1ST ST RD.
SILVER SPRINGS, FL 34488 US

New Principal Place of Business:

13355 N.E. 1 ST. ST. RD
SILVER SPRINGS, FL 34488 US

Current Mailing Address:

13355 NE 1ST ST RD
SILVER SPRINGS, FL 34488 US

New Mailing Address:

5361 S.W. 95 PLACE
OCALA, FL 34476 US

FEI Number: 59-0867193 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LENNON, JEAN
13355 NE 1ST RD.
SILVER SPRINGS, FL 34488 US

Name and Address of New Registered Agent:

LENNON, JEAN
5361 S.W. 95 PLACE
OCALA, FL 34476 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: JEAN LENNON

08/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LENNON, TIMOTHY
Address: 13355 N.E. 1ST. ST. RD.
City-St-Zip: SILVER SPRINGS, FL

Title: STD () Delete
Name: LENNON, JEAN
Address: 13355 N.E. 1ST. ST. RD.
City-St-Zip: SILVER SPRINGS, FL

Title: D () Delete
Name: LENNON, MAXINE
Address: 812 SO MEADE #307
City-St-Zip: COLORADO SPRINGS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LENNON, TIMOTHY
Address: 5361 S.W. 95 PLACE
City-St-Zip: OCALA, FL 34476 US

Title: STD (X) Change () Addition
Name: LENNON, JEAN
Address: 5361 S.W. 95 PLACE
City-St-Zip: OCALA, FL 34476 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: TIMOTHY LENNON

PD

08/13/2009

Electronic Signature of Signing Officer or Director

Date