


# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 11, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 737835</b>			
1. Entity Name <b>VICTORIOUS CHURCH OF GOD IN CHRIST, INC.</b>			
Principal Place of Business <b>726 PONDEROSA WEST LAKELAND FL 33810</b>		Mailing Address <b>7517 BAYLEAF ST. ZEPHYRHILLS FL 33540</b>	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent  <b>MCKENZIE, ALVIN T 726 PONDEROSA DR W LAKELAND FL 33810</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	



MOORE CR2E037 (11/03)

4. FEI Number **50-1440061** Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2004**

9. Election Campaign Financing: Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D</b> <b>BROCKINGTON, LARANGE</b> <b>2907 CHURCH ROAD</b> <b>ZEPHYRHILLS FL</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>U000000046105</b> <b>02/11/04-80089-011 61.25</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>SD</b> <b>BROWN, GLORIA J</b> <b>801 W. MADISON STREET</b> <b>PLANT CITY FL</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>P</b> <b>MCKENZIE, ALVIN T</b> <b>726 PONDEROSA DR W</b> <b>LAKELAND FL 33810</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D</b> <b>CHATMAN, KAREEN</b> <b>105 BURCHWOOD AV</b> <b>PLANT CITY FL 33565</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>VPTD</b> <b>MCKENZIE, EVANTHONY</b> <b>6579 FOXTREE LANE</b> <b>LAKELAND FL</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D</b> <b>SAMPSON, OLLIE M</b> <b>7427 LENA CIRCLE</b> <b>ZEPHYRHILLS FL</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Cheryl J Brown* *Gloria J Brown* *2/12/04* *813 936 5028*