

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737835

FILED
Jan 26, 2009
Secretary of State

Entity Name: VICTORIOUS CHURCH OF GOD IN CHRIST, INC.

Current Principal Place of Business:

7517 BAYLEAF ST
ZEPHYRHILLS, FL 33540

New Principal Place of Business:

Current Mailing Address:

7517 BAYLEAF ST.
ZEPHYRHILLS, FL 33540

New Mailing Address:

7517 BAYLEAF ST
ZEPHYRHILLS, FL 33540

FEI Number: 50-1440061

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MCKENZIE, ALVIN T
726 PONDEROSA DR W
LAKELAND, FL 33810 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JONES, DAVID D
Address: 1125 GALLOWAY RD
City-St-Zip: LAKELAND, FL 33810

Title: SD () Delete
Name: BROWN, GLORIA J,
Address: 801 W. MADISON STREET
City-St-Zip: PLANT CITY, FL

Title: P () Delete
Name: MCKENZIE, ALVIN T
Address: 726 PONDEROSA DR W
City-St-Zip: LAKELAND, FL 33810

Title: D () Delete
Name: CHATMAN, KAREEN
Address: P.O. BOX 313
City-St-Zip: PLANT CITY, FL 33563

Title: VPTD () Delete
Name: MCKENZIE, EVANTHONY,
Address: 6579 FOXTREE LANE
City-St-Zip: LAKELAND, FL

Title: D () Delete
Name: SAMPSON, OLLIE M
Address: 7427 LENA CIRCLE
City-St-Zip: ZEPHYRHILLS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D (X) Change () Addition
Name: COLEMAN, KAREEN
Address: P.O. BOX 313
City-St-Zip: PLANT CITY, FL 33563

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

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: GLORIA J BROWN

SD

01/26/2009

Electronic Signature of Signing Officer or Director

Date