


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 28, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 740871</b> 1. Entity Name <b>FOUNTAIN'S VICTORY TABERNACLE, INC.</b>	
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Principal Place of Business <b>18801 HWY 231 FOUNTAIN FL 32438 US</b>	Mailing Address <b>P. O. BOX 3014 PANAMA CITY FL 32401 US</b>
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1st MOORE CR2E037 (10/04)

2. Principal Place of Business	3. Mailing Address
Suite, Apt #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number <b>59-2879396</b>	Applied For
	Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

6. Name and Address of Current Registered Agent  <b>AMERSON, DORIS 20522 DUFFEY ROAD FOUNTAIN FL 32428</b>	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 Rev. Doris Amerson **DORIS AMERSON** 3-24-05  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

<b>FILE NOW: FEE IS \$81.25 Due By May 1, 2005</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	<b>Make Check Payable to Florida Department of State</b>
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10. OFFICERS AND DIRECTORS	
TITLE	D AMERSON, DORIS <input type="checkbox"/> Delete
NAME	20522 DUFFEY ROAD
STREET ADDRESS	FOUNTAIN FL
CITY-ST-ZIP	
TITLE	STD CLARK, SHERRY <input type="checkbox"/> Delete
NAME	20522 DUFFEY ROAD
STREET ADDRESS	FOUNTAIN FL
CITY-ST-ZIP	
TITLE	VD CRIDER, RICHARD <input type="checkbox"/> Delete
NAME	10734 HAPPYVILLE ROAD
STREET ADDRESS	YOUNGSTOWN FL
CITY-ST-ZIP	
TITLE	P WILLIAMS, DOTTIE <input type="checkbox"/> Delete
NAME	12806 DAVIES RD
STREET ADDRESS	FOUNTAIN FL 32438
CITY-ST-ZIP	
TITLE	C CRIDER, CATHY <input type="checkbox"/> Delete
NAME	10734 HAPPYVILLE RD
STREET ADDRESS	YOUNGSTOWN FL
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Rev. Sherry Clark **Rev Sherry CLARK** 3-24-05 850-722-7201  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #