

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740871

FILED  
Mar 21, 2010  
Secretary of State

**Entity Name:** FOUNTAIN'S VICTORY TABERNACLE, INC.

**Current Principal Place of Business:**

18801 HWY 231  
FOUNTAIN, FL 32438 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 3014  
PANAMA CITY, FL 32401 US

**New Mailing Address:**

**FEI Number:** 59-2879396

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

AMERSON, DORIS  
20522 DUFFEY ROAD  
FOUNTAIN, FL 32428 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  
Name: AMERSON, DORIS  
Address: 20522 DUFFEY ROAD  
City-St-Zip: FOUNTAIN, FL

Title: STD  
Name: CLARK, SHERRY  
Address: 20522 DUFFEY ROAD  
City-St-Zip: FOUNTAIN, FL

Title: VD  
Name: CRIDER, RICHARD  
Address: 10734 HAPPYVILLE ROAD  
City-St-Zip: YOUNSTOWN, FL

Title: P  
Name: WILLIAMS, DOTTIE  
Address: 20522 DUFFY RD.  
City-St-Zip: FOUNTAIN, FL 32438

Title: C  
Name: CRIDER, CATHY  
Address: 10734 HAPPYVILLE RD  
City-St-Zip: YOUNGSTOWN, FL

I hereby 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 all other like empowered.

SIGNATURE: PASTOR DORIS AMERSON

D

03/21/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date