

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000037

FILED
Feb 22, 2007
Secretary of State

Entity Name: VICTORIOUS LIFE CHURCH OF N.W. FL., INC.

Current Principal Place of Business:

9375 BRUNSON RD.
PENSACOLA, FL 32514

New Principal Place of Business:

Current Mailing Address:

9375 BRUNSON RD.
PENSACOLA, FL 32514

New Mailing Address:

FEI Number: 59-3747347

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PONDER, E. MARIE
9375 BRUNSON RD.
PENSACOLA, FL 32514 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: DUNN, DAVID W
Address: 9300 BEATRICE RD., APARTMENT A
City-St-Zip: PENSACOLA, FL 32514

Title: D () Delete
Name: JONES, DAVID A
Address: 3108 LAKE SUZANNE DR.
City-St-Zip: CANTONMENT, FL 32533

Title: D () Delete
Name: JONES, MARIE D
Address: 3108 LAKE SUZANNE DR.
City-St-Zip: CANTONMENT, FL 32533

Title: D () Delete
Name: MITCHELL, DIANE
Address: 41 W JOHNSON AVE
City-St-Zip: PENSACOLA, FL 32534

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DUNN, DAVID W
Address: 7135 PEARSON RD., APARTMENT #2
City-St-Zip: PENSACOLA, FL 32526

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

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 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: DAVID A. JONES

D

02/22/2007

Electronic Signature of Signing Officer or Director

Date