

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001223

FILED
Mar 21, 2009
Secretary of State

Entity Name: VICTORY CHRISTIAN LIFE CENTER, INC.

Current Principal Place of Business:

1101 SW 49 AVENUE
PLANTATION, FL 33317

New Principal Place of Business:

Current Mailing Address:

9840 NW 31 PL
SUNRISE, FL 33351

New Mailing Address:

FEI Number: 36-4490282

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EMILIMOR, JOHN O DR
6270 SW 8 COURT
NORTH LAUDERDALE, FL 33068 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: P () Delete
Name: EMILIMOR, JOHN DR
Address: 6270 SW 8TH COURT
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: V () Delete
Name: SALERNO, RONALD REV
Address: 2718 S. UNIVERSITY DR, #170
City-St-Zip: DAVIE, FL 33328

Title: S () Delete
Name: ABIDOYE, ABIOLA O
Address: 9840 NW 31 PLACE
City-St-Zip: SUNRISE, FL 33351

Title: T () Delete
Name: ABIDOYE, JAMESON O
Address: 9840 NW 31 PLACE
City-St-Zip: SUNRISE, FL 33351

Title: FS (X) Delete
Name: JOHNSON, EDMOND
Address: 6341 SW 9 PLACE
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: D (X) Delete
Name: OCHONOGOR, FIDELIS
Address: 6270 SW 8 CT
City-St-Zip: NORTH LAUDERDALE, FL 33968

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: FIDELIS, OCHONOGOR
Address: 2726 YOUPON LAKE CT
City-St-Zip: HOUSTON, TX 77084

Title: T (X) Change () Addition
Name: ED, EMILIMOR
Address: 1060 WYOMING AVE
City-St-Zip: FORT LAUDERDALE, FL 33312

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: JOHN EMILIMOR

P

03/21/2009

Electronic Signature of Signing Officer or Director

Date