

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002819

FILED
Mar 16, 2009
Secretary of State

Entity Name: VICTORY TABERNACLE CHRISTIAN CENTER INC.

Current Principal Place of Business:

507 GULF BEACH HWY.
PENSACOLA, FL 32507

New Principal Place of Business:

Current Mailing Address:

507 GULF BEACH HWY.
PENSACOLA, FL 32507

New Mailing Address:

FEI Number: 59-2970480

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOWE, WALTER
1383 RULE ST.
PENSACOLA, FL 32534 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: BLOXSON, GLORIA
Address: 7711 UNTREINER AV
City-St-Zip: PENSACOLA, FL 32534

Title: D () Delete
Name: MCCALL, ANGELA
Address: 6 MISSISSIPPI CIR.
City-St-Zip: PENSACOLA, FL 32505

Title: D () Delete
Name: LOWE, GENEVA
Address: 1383 RULE ST
City-St-Zip: PENSACOLA, FL 32534

Title: D () Delete
Name: HARRISON, JACQUELINE
Address: 7711 UNTREINER AVE
City-St-Zip: PENSACOLA, FL 32534

Title: D () Delete
Name: CULLIVER, DONNIE
Address: 1270 BOLIVIA ST.
City-St-Zip: PENSACOLA, FL 32534

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: () 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: JACQUELINE HARRISON

D

03/16/2009

Electronic Signature of Signing Officer or Director

Date