2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N06000006002

1. Entity Name

VISIÓN BEFORE VICTORY MINISTRY CHURCH, INCORPORATED



Aug 29, 2008 8:00 am Secretary of State 08-29-2008 90033 001 ***249.00

FILED

Principal Place of Business

Mailing Address

3301 E. HANNA AVE. TAMPA, FL 33610 3301 E. HANNA AVE. TAMPA, FL 33610



DO NOT WRITE IN THIS SPACE

08252008 No Chg-NP CR2E037 (4/06)

4. FEI Number 56-2591443

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JACKSON, STEPHEN N 3001 E. HANNA AVE. TAMPA, FL 33610

changed, or on an attachmen

SIGNATURE:

DO NOT WRITE IN THIS SPACE

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 Signature, typed or pinted name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by September 12, 2008 9. Election Campaign Finance Trust Fund Contribution.				\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRECTORS				· · · · · · · · · · · · · · · · · · ·
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JACKSON, STEPHEN N 10743 GLEN ELLEN DR. TAMPA, FL 33624				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JACKSON, ELIZABETH A 10743 GLEN ELLEN DR. TAMPA, FL 33624				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JACKSON, SIMONE 3001 E. HANNA AVE. TAMPA, FL 33610		DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JACKSON, STEPHANIE 3001 E. HANNA AVE. TAMPA, FL 33610				
TITLE MAME STREET ADDRESS CITY-ST-ZIP					
TITLE HAME STREET ADDRESS					
CITY-ST-ZIP		<u></u>			
12. I hereby certify that the information supplied with this filling 10cs not qualify for the exemptions contained 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 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 bustee empowered to execute his report as required by Chapter 617. Florida Statutes: and that my name appears in Block/10 or Block/10 if the corporation or the receiver or bustee empowered to execute his report as required by Chapter 617. Florida Statutes: and that my name appears in Block/10 or Block/10 if the corporation or the receiver or bustee.					