

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10955

FILED
Apr 28, 2007
Secretary of State

Entity Name: CHRISTIAN VICTORY FELLOWSHIP CHURCH, INC.

Current Principal Place of Business:

2302 JIM LEE RD
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

2302 JIM LEE RD
TALLAHASSEE, FL 32301 US

New Mailing Address:

FEI Number: 59-2573622 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CABELL, TOM N PRESIDE
2302 JIM LEE RD.
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

JOHNSON, WILLIAM C
2302 JIM LEE RD.
TALLAHASSEE, FL 32301 US

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: WILLIAM C JOHNSON 04/28/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MOORE, WILLIE
Address: 8480 PANACEA LANE
City-St-Zip: TALLAHASSEE, FL 32310

Title: D () Delete
Name: CABELL, TOM N
Address: 6440 KINGMAN TRAIL
City-St-Zip: TALLAHASSEE, FL 32309

Title: D () Delete
Name: LOVETT, ROSA
Address: 1401 HIGH HILL CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D-P (X) Change () Addition
Name: JOHNSON, WILLIAM C
Address: 274 HAMON AVE
City-St-Zip: SANTA ROSA BEACH, FL 32459

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

Title: D-VP () Change (X) Addition
Name: JOHNSON, LINDA W
Address: 274 HAMON AVE
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: D-SE () Change (X) Addition
Name: JONES, DAVID
Address: 2302 JIM LEE RD
City-St-Zip: TALLAHASSEE, FL 32301

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: WILLIAM C JOHNSON PRES 04/28/2007

Electronic Signature of Signing Officer or Director Date