

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23696

FILED
Mar 20, 2009
Secretary of State

Entity Name: BELIEVER'S VICTORY CHURCH, INC.

Current Principal Place of Business:

918 N. LAKESIDE DRIVE
LAKE WORTH, FL 33460 US

New Principal Place of Business:

Current Mailing Address:

918 N. LAKESIDE DRIVE
LAKE WORTH, FL 33460 US

New Mailing Address:

FEI Number: 59-2839471

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEBEHNKE-HEALD, PEGGY
4020 WATERWAY DRIVE
LAKE WORTH, FL 33461 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: PD () Delete
Name: DEBEHNKE HEALD, PEGGY
Address: 4020 WATERWAY DRIVE
City-St-Zip: LAKE WORTH, FL 33461

Title: VTD () Delete
Name: RICHARDS, NORMAN T
Address: 1511 HIGH RIDGE ROAD
City-St-Zip: LAKE WORTH, FL 33461

Title: SD () Delete
Name: HEALD, WALLACE SCOTT
Address: 4020 WATERWAY DRIVE
City-St-Zip: LAKE WORTH, FL 33461

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VTD (X) Change () Addition
Name: RICHARDS, NORMAN T
Address: 5288 BOSQUE LANE APT. 53
City-St-Zip: WEST PALM BEACH, FL 33415

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: PEGGY DEBEHNKE HEALD

PD

03/20/2009

Electronic Signature of Signing Officer or Director

Date