2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2009
Secretary of State

DOCUMENT# N32262

Entity Name: VICTORY ASSEMBLY OF GOD OF LAKELAND, FL., INC.

Current Principal Place of Business:

1401 GRIFFIN RD
LAKELAND, FL 33810 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 90489
LAKELAND, FL 33804 US

New Mailing Address:

PO BOX 90489
LAKELAND, FL 338040489 US

FEI Number: 59-2954281 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ENGLISH, DOUGLAS W
1401 GRIFFIN ROAD
LAKELAND, FL 33810 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:	PCD	( ) Delete
Name:	BLACKBURN, M. WAYNE,	
Address:	2209 MALACHITE DR	
City-St-Zip:	LAKELAND, FL	
Title:	AS	( ) Delete
Name:	ENGLISH, DOUGLAS W	
Address:	7105 O'DONIEL LOOP W.	
City-St-Zip:	LAKELAND, FL	
Title:	SD	( ) Delete
Name:	WALLACE, PAUL	
Address:	4040 STAFFORDSHIRE DRIVE	
City-St-Zip:	LAKELAND, FL	
Title:	VP	( ) Delete
Name:	MCBRIDE, DAN	
Address:	1400 GRASSLANDS BLVD #84	
City-St-Zip:	LAKELAND, FL	
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:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VP	(X) Change ( ) Addition
Name:	MCBRIDE, DAN	
Address:	2459 LAUREL GLEN DRIVE	
City-St-Zip:	LAKELAND, FL	
Title:	TD	( ) Change (X) Addition
Name:	RUTHERFORD, THOMAS	
Address:	916 WALT WILLIAMS ROAD	
City-St-Zip:	LAKELAND, FL	
Title:	D	( ) Change (X) Addition
Name:	JOHNSON, SAM	
Address:	5522 BLOOMFIELD BLVD	
City-St-Zip:	LAKELAND, FL	

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: DOUGLAS W. ENGLISH AS 01/08/2009

Electronic Signature of Signing Officer or Director — Date