


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 22, 2008 8:00 am
Secretary of State

04-22-2008 90018 019 ****61.25

DOCUMENT # N38275			
1. Entity Name VICTORY PENTECOSTAL HOLINESS CHURCH, INC.			
Principal Place of Business 2230 HWY. 2321 SOUTHPORT FL 32409		Mailing Address SHIRLEY WILLIAMS 3928 SCURLOCK LN PANAMA CITY FL 32409	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent BARTLETT, KEVIN REV 164 HITCHCOCK RD SOUTHPORT FL 32409		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ <small>Signature, print or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____			
FILE NOW: FEE IS \$61.25 Due By May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SOWELL, JACK 7841 RILEY RD SOUTHPORT FL 32409 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	BARTLETT, WILLIAM 1613 1ST STREET SOUTHPORT, FL 32409 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SCURLOCK, MILTON 3936 SCURLOCK LN PANAMA CITY FL 32409 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SOWELL, JACK 7841 RILEY RD SOUTHPORT FL 32409 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T WILLIAMS, SHIRLEY 3928 SCURLOCK LANE PANAMA CITY FL 32409 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Shirley Williams* - SHIRLEY WILLIAMS - 4-10-08 850-265-3288