## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N38275

FILED Apr 08, 2009 Secretary of State

Entity Name: VICTORY PENTECOSTAL HOLINESS CHURCH, INC.

**Current Principal Place of Business: New Principal Place of Business:** 2230 HWY. 2321 SOUTHPORT, FL 32409 **Current Mailing Address: New Mailing Address:** SHIRLEY WILLIAMS 3928 SCURLOCK LN PANAMA CITY, FL 32409 FEI Number: 59-2985051 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BARTLETT, KEVIN REV 164 HITCHĆOCK RD SOUTHPORT, FL 32409 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete SOWELL, JACK BARTLETT, WILLIAM Name: Name: 7841 RILEY RD Address: 1613 1ST Address: City-St-Zip: SOUTHPORT, FL 32409 City-St-Zip: SOUTHPORT, FL 32409 Title: ( ) Delete Title: () Change () Addition SCURLOCK, MILTON Name: Name: Address: 3936 SCURLOCK LN Address: City-St-Zip: PANAMA CITY, FL 32409 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition BARTLETT, WILLIAM WILLIAMS, SHIRLEY Name: Name: 3928 SCURLOCK LANE Address: **1613 1ST STREET** Address: City-St-Zip: PANAMA CITY, FL 32409 City-St-Zip: PANAMA CITY, FL 32409 Title: (X) Delete Title: () Change () Addition Name: WILLIAMS, SHIRLEY Name: Address: 3928 SCURLOCK LANE Address: City-St-Zip: PANAMA CITY, FL 32409 City-St-Zip: Title: (X) Delete Title: () Change () Addition WILLIAMS, SHIRLEY Name: Name: 3928 SCURLOCK LN Address: Address: City-St-Zip: PANAMA CITY, FL 32409 City-St-Zip: Title: (X) Delete Title: () Change () Addition SCURLOCK, MILTON Name: Name: Address: 3936 SCURLOCK LN Address: PANAMA CITY, FL 32409 City-St-Zip: 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: KEVIN BARTLETT MIN 04/08/2009