2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000059

FILED Apr 25, 2009 Secretary of State

Entity Name: VICTORY BAPTIST CHURCH OF BELLEVIEW, FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

6185 SE 140TH ST

SUMMERFIELD, FL 34491 US

Current Mailing Address: New Mailing Address:

P O BOX 138

SUMMERFIELD, FL 34491 US

FEI Number: 59-3155163 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

AGUDELO, OSCAR

8 CLEAR WAY

OCALA, FL 34472 US

TUCKER, AUSTIN PASTOR
21654 SW RAINTREE ST
DUNNELLON, FL 34431 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: AUSTIN TUCKER 04/25/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: DT () Delete Title: () Change () Addition

 Name:
 LANE, JULIUS
 Name:

 Address:
 5800 SE 119 ST
 Address:

 City-St-Zip:
 BELLEVIEW, FL 34421
 City-St-Zip:

Title: DT () Delete Title: DT (X) Change () Addition

 Name:
 SOTO, ALEX
 Name:
 CONNELL, JAMES

 Address:
 P.O. BOX 3532
 Address:
 11950 SE 50TH AVE. RD.

 City-St-Zip:
 BELLEVIEW, FL 34421
 City-St-Zip:
 BELLEVIEW, FL 34420

Title: TR () Delete Title: TR (X) Change () Addition

 Name:
 AGUDELO, OSCAR
 Name:
 LARROSA, APRIL

 Address:
 8 CLEAR WAY
 Address:
 14200 SE 61ST AVE.

 City-St-Zip:
 OCALA, FL 34472
 City-St-Zip:
 SUMMERFIELD, FL 34491

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: AUSTIN TUCKER RA 04/25/2009