

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003024

FILED
Apr 16, 2009
Secretary of State

Entity Name: TRIUMPH CHURCH OF GOD, INC.

Current Principal Place of Business:

CORNER OF RIVER ROAD AND CARVER AVENUE
WEWAHITCHKA, FL 32465

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1343 N/A
WEWAHITCHKA, FL 32465 US

New Mailing Address:

FEI Number: 59-3191613

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACKSON, JOSEPH
CORNER OF RIVER ROAD AND CARVER AVENUE
WEWAHITCHKA, FL 32465 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: D () Delete
Name: ROULHAC, JASON
Address: PO BOX 10616 N/A
City-St-Zip: PANAMA CITY, FL 32404

Title: D () Delete
Name: JACKSON, JOSEPH L
Address: P O BOX 1343
City-St-Zip: WEWAHITCHKA, FL 32465

Title: D () Delete
Name: JACKSON, SYLVIA
Address: PO BOX 1343 N/A
City-St-Zip: WEWAHITCHKA, FL 32465

Title: DS () Delete
Name: JACKSON, BETTY J
Address: P O BOX 13 HILL ST N/A
City-St-Zip: WEWAHITCHKA, FL 32465

Title: D () Delete
Name: JACKSON, MATTIE M
Address: P O BOX 10616
City-St-Zip: PANAMA CITY, FL 32404

Title: D () Delete
Name: GRAY, WILLIE C
Address: P O BOX 840 N/A
City-St-Zip: WEWAHITCHKA, FL 32465

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

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

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: JOSEPH LEE JACKSON

PAST

04/16/2009

Electronic Signature of Signing Officer or Director

Date