

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006425

Entity Name: VICTORY WORSHIP CENTER OF JESUS CHRIST, INC.**Current Principal Place of Business:**335 GENEVA DRIVE
OVIEDO, FL 32765**Current Mailing Address:**335 GENEVA DRIVE
OVIEDO, FL 32765**FEI Number: 59-3672638****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**THOMPSON, OWEN
842 BELHAVEN DR
ORLANDO, FL 32828 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**Officer/Director Detail :**

Title	P
Name	THOMPSON, OWEN
Address	842 BELHAVEN DR
City-State-Zip:	ORLANDO FL 32828

Title	V
Name	THOMPSON, JANET
Address	842 BELHAVEN DR
City-State-Zip:	ORLANDO FL 32828

Title	S
Name	ECCLESTON, CARLA
Address	513 YELLOW TRAIL PLACE
City-State-Zip:	OVIEDO FL 32766

Title	D
Name	BROMFIELD, DELROY
Address	3598 OVERCUP OAK DR.
City-State-Zip:	OVIEDO FL 32766

Title	B
Name	ROBINSON, ROBERTO
Address	2533 ATLANTIC AVE
City-State-Zip:	BROOKLYN NY 11207

Title	D
Name	GORDON, SEYMOUR
Address	705 CHELTENHAM AVENUE
City-State-Zip:	DELTONA FL 32738

I hereby 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 all other like empowered.

SIGNATURE: OWEN THOMPSON**MR****04/05/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date