

**2022 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  
OVIDO, FL 32765**Current Mailing Address:**335 GENEVA DRIVE  
OVIDO, FL 32765**FEI Number:** 59-3672638**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**THOMPSON, OWEN  
335 GENEVA DRIVE  
OVIDO, FL 32765 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         | 335 GENEVA DRIVE |
| City-State-Zip: | OVIDO FL 32765   |

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

|                 |                          |
|-----------------|--------------------------|
| Title           | V                        |
| Name            | THOMPSON, JANET          |
| Address         | 15180 MOULTRIE POINTE RD |
| City-State-Zip: | ORLANDO FL 32828         |

|                 |                   |
|-----------------|-------------------|
| 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:** JANET R THOMPSON

V

04/11/2022

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date