

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000009392

**Entity Name:** VICTORIOUS LIFE CHURCH OF PORT ORANGE, FLORIDA, INC.

**Current Principal Place of Business:**

3489 S. CLYDE MORRIS BLVD  
PORT ORANGE, FL 32129

**Current Mailing Address:**

P.O. BOX 291075  
PORT ORANGE, FL 32129-1075

**FEI Number:** 59-3579057

**Certificate of Status Desired:** No

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

VICTORIOUS LIFE CHURCH  
3489 S CLYDE MORRIS BLVD  
PORT ORANGE, FL 32129 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            PRESIDENT, PASTOR, CHAIRMAN  
Name            FINKEN, THOMAS  
Address        5968 PLANTERA COURT  
City-State-Zip: PORT ORANGE FL 32127

Title            TREASURER, DEACON  
Name            CRANE, RICHARD  
Address        705 BRANCH DRIVE  
City-State-Zip: PORT ORANGE FL 32127

Title            DEACON  
Name            SALICRUP, ISMAEL  
Address        1514 SAN JOSE BLVD.  
City-State-Zip: HOLLY HILL FL 32117

Title            DEACON  
Name            HAIRE, RANDY  
Address        103 LINDA ROAD  
City-State-Zip: NEW SMYRNA BEACH FL 32168

*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:** THOMAS FINKEN

**PASTOR, CHAIRMAN**

**02/15/2019**

Electronic Signature of Signing Officer/Director Detail

Date