

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 03, 2007 08:00 A
Secretary of State

DOCUMENT # 740871

1. Entity Name

FOUNTAIN'S VICTORY TABERNACLE, INC.



Principal Place of Business

Mailing Address

18801 HWY 231
FOUNTAIN FL 32438
US

P. O. BOX 3014
PANAMA CITY FL 32401
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

59-2879396

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

AMERSON, DORIS
20522 DUFFEY ROAD
FOUNTAIN FL 32428

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: D ☐ Delete
NAME: AMERSON, DORIS
STREET ADDRESS: 20522 DUFFEY ROAD
CITY-STATE-ZIP: FOUNTAIN FL

TITLE: ☐ Change ☐ Addition
NAME: 000000760650
STREET ADDRESS: 05/25/07-80022-015 61.25
CITY-STATE-ZIP:

TITLE: STD ☐ Delete
NAME: CLARK, SHERRY
STREET ADDRESS: 20522 DUFFEY ROAD
CITY-STATE-ZIP: FOUNTAIN FL

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

TITLE: VD ☐ Delete
NAME: CRIDER, RICHARD
STREET ADDRESS: 10734 HAPPYVILLE ROAD
CITY-STATE-ZIP: YOUNGSTOWN FL

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

TITLE: P ☐ Delete
NAME: WILLIAMS, DOTTIE
STREET ADDRESS: 12806 DAVIES RD
CITY-STATE-ZIP: FOUNTAIN FL 32438

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

TITLE: C ☐ Delete
NAME: CRIDER, CATHY
STREET ADDRESS: 10734 HAPPYVILLE RD
CITY-STATE-ZIP: YOUNGSTOWN FL

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Doris Amerson

4-25-07

1-850-722-1594