2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 26, 2004 8:00 am Secretary of State

DOCUMENT # 713008 1. Entity Name VICTORY LIFE AND PRAISE, INC.			Secretary of State 04-26-2004 90423 010 ****70.00					
Principal Place of Business 530 WEST HOOKER STREET BARTOW, FL 33830		Mailing Address P O BOX 134 BARTOW, FL 33831-0134				nd - 1969 		
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04162004 Cr	ng-NP CR2	E037 (10/03)		
City & State		City & State		4. FEI Number 59-253344	2	No	plied For t Applicable	
Zip	Country	Zip	Country	5. Certificate of Sta	atus Desired 🔲	\$8.75 Add Fee Required		
	6. Name and Address of Curren	- Name	7. Name and Address of New Registered Agent					
BOWEN, GREG REV				Name				
	EHOLLOW DRIVE		Street Address	Street Address (P.O. Box Number is Not Acceptable)				
LAKELAND, FL 33813			,	•				
			City	City FL Zip Code				
	named entity submits this statement t	or the purpose of changing its reg	istered office or registe	ered agent, or both, in	the State of Florida. I	am tamiliar with.	and accept	
SIGNATURE	lions of registered agent. Posts Grey Boar Signature, typed or printed name of registered agen		ig sterod Agent signaturo require	cd when reinstating)	1. J. DA	16/04	1_	
	Filing Fee is \$61.25 Due by May 1, 2004	9. Election Campa Trust Fund Con		\$5.00 May Be Added to Fees		neck payable to partment of St		
10.	OFFICERS AND D		A CONTRACTOR	ADDITIONS/CHANGI	ES TO OFFICERS AND	•		
NAME STREET ADDRESS CITY-ST-ZIP	PC MITCHELL, ROY 1235 ALTURAS RD BARTOW, FL 33830	□ Delete	NAME STREET ADDRESS CITY-ST-ZIP	harle Mc 245 Alti 3artow	Donald Liras Rd Fl. 338		M Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV BOWEN, PAUL G SR 3849 DOVEHOLLOW DR	☐ Delete	TITLE OCO NAME STREET ADDRESS 13	dd Hartl	ey Ave	☐ Change	Addition	
TITLE	LAKELAND, FL 33813		CITY-ST-ZIP	alterior	738	3D		
NAME	D	Delete	116	aftow; I	=L 3381	30 □ Change	☐ Addition	
1	 	Delete	CITY-ST-ZIP	artow;	≘L 3381		Addition	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D OTTINGER, MARY ANN '3405 FERNCLIFF LANE- CLEARWATER, FL 33761 D OTTINGER, NOLEN R JR 3405 FERNCLIFF LN	Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS. CITY-ST-ZIP TITLE NAME STREET ADDRESS	artow;	=L 3381		Addition Addition	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D OTTINGER, MARY ANN 3405 FERNCLIFF LANE CLEARWATER, FL 33761 D OTTINGER, NOLEN R JR		CITY-ST-ZIP TITLE NAME STREET ADDRESS. CITY-ST-ZIP TITLE NAME	artow;	=L 3381	Change	· ' 	

12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

Secretery

SIGNATURE: Kend

D TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/04 (863) 533-65.

Daytime Phone #