

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

99 APR 21 AM 11:11

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N96000002883

1. Corporation Name

VICTORY PRAISE CENTER, INC.

Principal Place of Business

Mailing Address

2890 MONTE CARLO TRAIL  
ORLANDO FL 32805

2890 MONTE CARLO TRAIL  
ORLANDO FL 32805

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

2840 MONTE CARLO TR.

City & State

City & State

ORLANDO FL

Zip

Country

Zip

Country

32805 USA

REINSTATEMENT

98-211  
4/21/99

4. Date Incorporated or Qualified To Do Business in Florida

05/31/1996

5. FEI Number

58-3554457  
APPLIED FOR

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PD	DOUGLAS, RALPH	1104 N NOWELL ST	ORLANDO FL 32808
VSD	GRIFFIN, WILLIE L JR	2890 MONTE CARLO TR 2840	ORLANDO FL 32805
TD	NORMAN, CAREY	469 WINDING HOLLOW AVE	OCFEE FL
<del>ND</del>	<del>ANDERSON, ROBERT</del>	<del>513 WELBORNE AVE</del>	<del>ORLANDO FL 32789</del> WINTER PARK FL 32789
D	SHAZIER, NATHANIEL	4432 KING COLE BLVD.	ORLANDO FL 32805
D	MARINE, JAMES	2581 BLUEGILL ST	ORLANDO FL 32839

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

GRIFFIN, WILLIE L JR  
~~2890 MONTE CARLO TRAIL~~ 2840 MONTE CARLO TR.  
ORLANDO FL 32805

Name

Street Address (P.O. Box Number, if Applicable)

N96000002883-4207--7

Suite, Apt. #, Etc

04/27/99--01099--001

City

State

Zip Code

\*\*\*297.50 \*\*\*297.50

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent *Willie Griffin Jr.*  
REGISTERED AGENT MUST SIGN

Date 3-20-99

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes  No

(See other side for information on intangible tax)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: RALPH DOUGLAS  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-20-99 (407) 426-7809  
Date Day of Month Year

CR2640 (9/98)