


2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED

2006 OCT 23 PM 3:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 763262	
1. Entity Name CONCORD'S VICTORY ASSEMBLY OF GOD CHURCH, INC.	

Principal Place of Business EAST SIDE HIGHWAY 157 1 MILE SOUTH OF HIGHWAY 12 HAVANA, FL 32333 US	Mailing Address 3012 CONCORD ROAD HAVANA, FL 32333 US
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address PO Box 1269 Suite, Apt. #, etc.
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City & State Havana FL	City & State Havana FL
Zip 32333	Country Gadsden

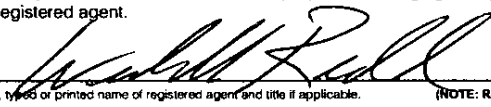
10132006 REIN-NP CR2E099 (11/05)

4. FEI Number 59-2545108	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent STEPHENS, ROBERT L 4221 ROCKINGHAM ROAD TALLAHASSEE, FL 32303	
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7. Name and Address of New Registered Agent Name Wendell Rudd Street Address (P.O. Box Number is Not Acceptable) PO Box 1269 / 3012 Concord Road City Havana FL Zip Code 32333	
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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 10/18/06
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FILE NOW!!! FEE IS \$61.25 After January 1, 2007, Fee will be \$122.50	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STEPHENS, ROBERT L 8469 HWY 12 WEST HAVANA, FL 32333 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Rudd, Wendell PO Box 1269 Havana, FL 32333 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS CAUSEY, NELLIE 16069 BOB ELLIS RD. TALLAHASSEE, FL 32310 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	900081123039 10/23/06--01059--002 **\$61.25 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR WESTBERRY, M L 1961 W SHARON STREET QUINCY, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR Causey, John R. 16069 Bob Ellis RD Tallahassee, FL 32310 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR STEPHENS, SAMMY RT 2 BOX 518-A HAVANA, FL 32333 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR DAVIS, JESSE W 246 FIELDS RD. HAVANA, FL 32333 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR PARKS, MARVINE 225 DOWNSWOOD AVE. HAVANA, FL 32333 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR Westberry, LeRoy 945 Jones Road Whigham GA 31797 <input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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.	
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SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	DATE 10/18/06	DAYTIME PHONE # 850-576-8782
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