2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006187

Entity Name: VICTORY IN PRAISE MINISTRIES INC.

FILED Apr 14, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
	DNALD REAG DD, FL 32750					
Current Mailing Address:				New Mailing Address:		
P.O. BOX 617520 ORLANDO, FL 32861				1680 N. RONALD REAGAN BLVD. LONGWOOD, FL 32750		
FEI Number: 59-3792979 FEI Number Applied For ()			FEI Nun	umber Not Applicable () Certificate of Status Desired		Certificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
SMITH, ROGER D II 647 GRANDIFLORA DRIVE ORLANDO, FL 32811 US				SMITH, ROGER D II 1260 FOXFORREST CIRCLE APOPKA, FL 32712 US		
The above in the State	named entity of Florida.	submits this statement for the p	urpose o	f changing i	ts registered	office or registered agent, or both,
SIGNATURE:				04/14/2005		
	Electro	nic Signature of Registered Age	nt			Date
OFFICERS AND DIRECTORS:				ADDITION	IS/CHANGES	S TO OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	P (SMITH, ROGE 647 GRANDIF ORLANDO, FL	LORA DRIVE		Title: Name: Address: City-St-Zip:	SMITH, ROGE	RREST CIRCLE
Title: Name: Address: City-St-Zip:	V (SMITH, GWEN 647 GRANDIF ORLANDO, FL	LORA DRIVE		Title: Name: Address: City-St-Zip:	SMITH, GWE	RREST CIRCLE
Title: Name: Address: City-St-Zip:	D (CLARKE, GLE 5908 LONG C ORLANDO, FL	ANYON DRIVE		Title: Name: Address: City-St-Zip:	() Change ()Addition
Title: Name: Address: City-St-Zip:	D (SOLOMON, TO 2205 N. POWE ORLANDO, FL	ERS DRIVE		Title: Name: Address: City-St-Zip:	() Change ()Addition
Title: Name: Address: City-St-Zip:	D (TATE, ANDRE 5659 NOKOMI ORLANDO, FL			Title: Name: Address: City-St-Zip:	() Change ()Addition
Title: Name:	S (WYMAN, CELI			Title: Name:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

City-St-Zip:

SIGNATURE: ROGER D. SMITH PRES 04/14/2005

City-St-Zip: SANFORD, FL 32771