

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006187

FILED
Apr 10, 2006
Secretary of State

Entity Name: VICTORY IN PRAISE MINISTRIES INC.

Current Principal Place of Business:

1680 N. RONALD REAGAN BLVD.
LONGWOOD, FL 32750

New Principal Place of Business:

Current Mailing Address:

1680 N. RONALD REAGAN BLVD.
LONGWOOD, FL 32750

New Mailing Address:

FEI Number: 59-3792979

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, ROGER D II
1260 FOXFORREST CIRCLE
APOPKA, FL 32712 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SMITH, ROGER D II
Address: 1260 FOXFORREST CIRCLE
City-St-Zip: APOPKA, FL 32712

Title: V () Delete
Name: SMITH, GWENDOLYN L
Address: 1260 FOXFORREST CIRCLE
City-St-Zip: APOPKA, FL 32712

Title: D () Delete
Name: CLARKE, GLENFORD
Address: 5908 LONG CANYON DRIVE
City-St-Zip: ORLANDO, FL 32810

Title: D () Delete
Name: SOLOMON, TORRANCE
Address: 2205 N. POWERS DRIVE
City-St-Zip: ORLANDO, FL 32818

Title: D () Delete
Name: TATE, ANDRE
Address: 5659 NOKOMIS CIRCLE
City-St-Zip: ORLANDO, FL 32839

Title: S () Delete
Name: WYMAN, CELESTE
Address: 1624 HICKORY AVE
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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.

SIGNATURE: ROGER SMITH

P

04/10/2006

Electronic Signature of Signing Officer or Director

_____ Date