

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000001247

FILED
Feb 28, 2003
Secretary of State

Entity Name: VICTORIOUS LIFE MINISTRIES, INC.

Current Principal Place of Business:

144 FLAME VINE DR
NAPLES, FL 34110

New Principal Place of Business:

10421 RAGSDALE ST.
BONITA SPRINGS, FL 34135 US

Current Mailing Address:

144 FLAME VINE DR
NAPLES, FL 34110

New Mailing Address:

P.O. BOX 366307
BONITA SPRINGS, FL 34136 US

FEI Number: 30-0043292

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GARMAN, GUY
3801 S OCEAN DR 4Z
HOLLYWOOD, FL 33019 US

Name and Address of New Registered Agent:

GONZALEZ, HERIBERTO
144 FLAME VINE DRIVE
NAPLES, FL 34110 US

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: HERIBERTO GONZALEZ

02/28/2003

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GONZALEZ, HERIBERTO
Address: PO BOX 10191
City-St-Zip: NAPLES, FL 341010191

Title: D () Delete
Name: PLAMONDON, GREGORY
Address: 3083 LANCASTER DR #3
City-St-Zip: NAPLES, FL 34105

Title: D () Delete
Name: HATTEMER, BARBARA
Address: 702 BOB WHITE LANE
City-St-Zip: NAPLES, FL 34108

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GONZALEZ, HERIBERTO
Address: PO BOX 10191
City-St-Zip: NAPLES, FL 341010191 US

Title: D (X) Change () Addition
Name: WALKER, FRANKIE
Address: 7857 SOUTH MEMORIAL DRIVE #4103
City-St-Zip: TULSA, OK 74133 US

Title: D (X) Change () Addition
Name: ROSEMAN, ALAN
Address: 26865 LOST WOODS CIRCLE
City-St-Zip: BONITA SPRINGS, FL 34135 US

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.

SIGNATURE: HERIBERTO GONZALEZ

D

02/28/2003

Electronic Signature of Signing Officer or Director

Date