

**2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N02000002921

**FILED  
Feb 05, 2010  
Secretary of State**

**Entity Name:** VICTORIOUS CHRISTIAN LIFE MINISTRIES, INC.

**Current Principal Place of Business:**

1373 HAULOVER AVENUE.  
SPRING HILL, FL 34608

**New Principal Place of Business:**

10145 CORTEZ BLVD.  
BROOKSVILLE, FL 34613

**Current Mailing Address:**

1373 HAULOVER AVE.  
SPRING HILL, FL 34608

**New Mailing Address:**

**FEI Number:** 42-0583745      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MASON, TOMMY L PASTOR  
1373 HAULOVER AVE.  
SPRING HILL, FL 34608    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: TOMMY L. MASON

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: MASON, TOMMY L  
Address: 1373 HAULOVER AVE.  
City-St-Zip: SPRING HILL, FL 34608

Title: VP  
Name: JACKSON, MICHAEL  
Address: 10293 FOX SPARROW AVENUE  
City-St-Zip: BROOKSVILLE, FL 34613

Title: T  
Name: JACKSON, SONYA  
Address: 10293 FOX SPARROW AVENUE  
City-St-Zip: BROOKSVILLE, FL 34613

I hereby 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 all other like empowered.

SIGNATURE: TOMMY L. MASON

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

02/05/2010

\_\_\_\_\_  
Date