

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000002122

**FILED**  
**Jul 21, 2004**  
**Secretary of State****Entity Name:** VICTORY WORSHIP CHURCH INC**Current Principal Place of Business:**8402 GOLDOME DR  
PORT RICHEY, FL 34668 US**New Principal Place of Business:**3545 UNIVERSAL PLAZA  
NEW PORT RICHEY, FL 34652 US**Current Mailing Address:**8402 GOLDOME DR  
PORT RICHEY, FL 34668 US**New Mailing Address:**3545 UNIVERSAL PLAZA  
NEW PORT RICHEY, FL 34652 US**FEI Number:** 04-3746929**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**ELLIOT, MILES D  
8402 GOLDOME DR  
PORT RICHEY, FL 34668 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:** ELLIOT, MILES D  
**Address:** 8402 GOLDOME DR  
**City-St-Zip:** PORT RICHEY, FL 34668 US**Title:** VP ( ) Delete  
**Name:** KIMBERLY, MILES D  
**Address:** 8402 GOLDOME DR  
**City-St-Zip:** PORT RICHEY, FL 34668 US**Title:** SEC ( ) Delete  
**Name:** DAVID, GEIGER J  
**Address:** 11105 TYLER DR  
**City-St-Zip:** PORT RICHEY, FL 34668 US**Title:** ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:****ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** VP (X) Change ( ) Addition  
**Name:** LE, HAI Q  
**Address:** 3531 JACKSON DRIVE  
**City-St-Zip:** HOLIDAY, FL 34691 US**Title:** SEC (X) Change ( ) Addition  
**Name:** LE, KATHLEEN R  
**Address:** 3531 JACKSON DRIVE  
**City-St-Zip:** HOLIDAY, FL 34691 US**Title:** TREA ( ) Change (X) Addition  
**Name:** BUTLER, MELANIE J  
**Address:** 7731 SAGEBRUSH DRIVE  
**City-St-Zip:** PORT RICHEY, FL 34668**Title:** OFF ( ) Change (X) Addition  
**Name:** BUTLER, BRYAN S  
**Address:** 7731 SAGEBRUSH DRIVE  
**City-St-Zip:** PORT RICHEY, FL 34668**Title:** OFF ( ) Change (X) Addition  
**Name:** MILES, KIMBERLY D  
**Address:** 8402 GOLDOME DRIVE  
**City-St-Zip:** PORT RICHEY, FL 34668

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: MELANIE J BUTLER

TRES

07/21/2004

Electronic Signature of Signing Officer or Director

Date