2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2005
Secretary of State

DOCUMENT# N03000002122

Entity Name: VICTORY WORSHIP CHURCH INC

Current Principal Place of Business:

3545 UNIVERSAL PLAZA
NEW PORT RICHEY, FL 34652 US

New Principal Place of Business:

Current Mailing Address:

3545 UNIVERSAL PLAZA
NEW PORT RICHEY, FL 34652 US

New Mailing Address:

FEI Number: 04-3746929 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

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: LE, HAI Q
Address: 3531 JACKSON DRIVE
City-St-Zip: HOLIDAY, FL 34691 US

Title: SEC ( ) Delete
Name: LE, KATHLEEN R
Address: 3531 JACKSON DRIVE
City-St-Zip: HOLIDAY, FL 34691 US

Title: TREA ( ) Delete
Name: BUTLER, MELANIE J
Address: 7731 SAGEBRUSH DRIVE
City-St-Zip: PORT RICHEY, FL 34668

Title: OFF ( ) Delete
Name: BUTLER, BRYAN S
Address: 7731 SAGEBRUSH DRIVE
City-St-Zip: PORT RICHEY, FL 34668

Title: OFF ( ) Delete
Name: MILES, KIMBERLY D
Address: 8402 GOLDOME DRIVE
City-St-Zip: PORT RICHEY, FL 34668

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
Name:
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 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 TREA 01/22/2005
Electronic Signature of Signing Officer or Director — Date