## 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N03000002122

Entity Name: VICTORY WORSHIP CHURCH INC

FILED Oct 11, 2007 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
	ERSAL PLAZA RICHEY, FL 34652 US			
Current Mailing Address:		New Mailing Address:		
	RSAL PLAZA RICHEY, FL 34652 US			
FEI Number: 04-3746929 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  Name and Address of Current Registered Agent:  Name and Address of New Registered Agent:				
ELLIOT, MIL 8402 GOLD	LES D	a Agenti	Traine and	Address of New Registered Agent.
The above r		nent for the purpose of	f changing it	s registered office or registered agent, or both,
SIGNATURE: ELLIOT DAVID MILES				
	Electronic Signature of Re	gistered Agent		Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P ( ) Delete ELLIOT, MILES D 8402 GOLDOME DR PORT RICHEY, FL 34668 US		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VP ( ) Delete MILES, KIMBERLY D 8402 GOLDOME DRIVE PORT RICHEY, FL 34668 US		Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	SEC () Delete GEIGER, DAVID J 2108 SHADY COVE DRIVE HOLIDAY, FL 34691 US		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	TREA ( ) Delete GEIGER, CARLA N 2108 SHADY COVE DRIVE HOLIDAY, FL 34691		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	OFF ( ) Delete WINGFIELD, SEINE FLORAMAR DRIVE NEW PORT RICHEY, FL 34652		Title: Name: Address: City-St-Zip:	OFF (X) Change ( ) Addition WINGFIELD, SEINE 4555 FLORAMAR DRIVE NEW PORT RICHEY, FL 34652
Title: Name: Address: City-St-Zip:	OFF () Delete WALDROUPE, BAARON D 3917 CHEVAL DRIVE HOLIDAY, FL 34691		Title: Name: Address: City-St-Zip:	ADMN (X) Change ( ) Addition WALDROUPE, BAARON D 3917 CHEVAL DRIVE HOLIDAY, FL 34691

I hereby certify that the information supplied with this filing does not qualify 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: SEINE WINGFIELD ADMN 10/11/2007