2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005911

FILED Feb 02, 2009 Secretary of State

Entity Na	me: VICTOR	Y TEMPLE MINISTRIES FAMIL	Y LIFE CENTER INC.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	VILLISTON RE ILLE, FL 3264				
Current Mailing Address:			New Mailing Address:		
P.O.BOX 2 GAINESVI	2145 ILLE, FL 3260:	2			
FEI Number	: 59-2915340	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
4505 NW 5	ELIZABETH L 51ST DR ILLE, FL 3260	6 US			
The above in the State	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VP (YOUNG, ARIAN 4505 NW 51ST GAINESVILLE,	Γ DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P (YOUNG, ELIZA 4505 NW 51ST GAINESVILLE,	r DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	S (STOKES, JOY) Delete	Title:	() Change () Addition	

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: ELIZABETH L. YOUNG CEO 02/02/2009