

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000005911

**FILED**  
**Mar 09, 2011**  
**Secretary of State**

**Entity Name:** VICTORY TEMPLE MINISTRIES FAMILY LIFE CENTER INC.

**Current Principal Place of Business:**

908 S.E. WILLISTON RD  
GAINESVILLE, FL 32641

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 2145  
GAINESVILLE, FL 32602

**New Mailing Address:**

**FEI Number:** 59-2915340

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

YOUNG, ELIZABETH L  
4505 NW 51ST DR  
GAINESVILLE, FL 32606 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:** VP  
**Name:** YOUNG, ARIANA F  
**Address:** 4505 NW 51ST DR  
**City-St-Zip:** GAINESVILLE, FL 32606

**Title:** P  
**Name:** YOUNG, ELIZABETH L  
**Address:** 4505 NW 51ST DR  
**City-St-Zip:** GAINESVILLE, FL 32606

**Title:** S  
**Name:** STOKES, JOY B  
**Address:** 1918 S.E. 15TH AVENUE  
**City-St-Zip:** GAINESVILLE, FL 32641

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:** ELIZABETH L. YOUNG

P

03/09/2011

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

\_\_\_\_\_  
Date