

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007557

FILED
Feb 10, 2007
Secretary of State

Entity Name: VICTORY TEMPLE MINISTRIES, INC

Current Principal Place of Business:

POST OFFICE BOX 491193
LEESBURG, FL 34749

New Principal Place of Business:

1308 NORTH 14TH STREET
LEESBURG, FL 34748

Current Mailing Address:

POST OFFICE BOX 491193
LEESBURG, FL 34749

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE MILLHORN LAW FIRM, LLC
13710 US HWY441, SUITE 100
LADY LAKE, FL 32159 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: MORRIS, WILLIAM E
Address: POST OFFICE BOX 491193
City-St-Zip: LEESBURG, FL 34749

Title: VP () Delete
Name: MORRIS, KELLY M
Address: POST OFFICE BOX 491193
City-St-Zip: LEESBURG, FL 34749

Title: TRE () Delete
Name: FIELDS, TONY
Address: POST OFFICE BOX 491193
City-St-Zip: LEESBURG, FL 34749

Title: SEC () Delete
Name: FIELDS, YOLANDA
Address: POST OFFICE BOX 491193
City-St-Zip: LEESBURG, FL 34749

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM E. MORRIS

P

02/10/2007

Electronic Signature of Signing Officer or Director

Date