

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 24, 2008 08:00 AM
Secretary of State

DOCUMENT # N06000009274

1. Entity Name
VICTORY WORSHIP ASSEMBLY INC



Principal Place of Business
**421 NW 33RD AVE
FT. LAUDERDALE, FL 33311**

Mailing Address
**421 NW 33RD AVE
FT. LAUDERDALE, FL 33311**



03082008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE

Applied For
☒ Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HILL, DAVID L
421 NW 33RD AVE
FT. LAUDERDALE, FL 33311**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	HILL, DAVID L
STREET ADDRESS	421 NW 33RD AVE
CITY-ST-ZIP	FT. LAUDERDALE, FL 33311
TITLE	VP
NAME	BRADFORD, CURTIS L
STREET ADDRESS	5310 NW 16TH STREET APT. A
CITY-ST-ZIP	LAUDERHILL, FL 33313
TITLE	SEC.
NAME	PRYOR, JULIE
STREET ADDRESS	1231 NW 27TH LANE
CITY-ST-ZIP	FT. LAUDERDALE, FL 33311
TITLE	TREA
NAME	DAVIS, ROBERT
STREET ADDRESS	421 NW 33RD AVE
CITY-ST-ZIP	FT. LAUDERDALE, FL 33311
TITLE	C
NAME	DAVIS, SARAH P
STREET ADDRESS	421 N.W. 33RD AVENUE
CITY-ST-ZIP	FORT LAUDERDALE, FL 33311
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

UN00000829508
04/09/08-80053-007 70.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Sarah P. Davis* **Sarah P. Davis**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/21/08

Date

954-791-1257

Daytime Phone #