2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003407

Entity Name: VICTORY IN CHRIST WORLDWIDE, INC.

FILED Apr 16, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
11219 LOKANOTOSA TDAII	

ORLANDO, FL 32817

Current Mailing Address: New Mailing Address:

835 ROYALWOOD LANE OVIEDO, FL 32765

FEI Number: 14-1994361 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DOROUGH, CALZADA & HAMNER, P.L.

419 NORTH MAGNOLIA AVENUE

ORLANDO, FL 32801 US

ANDERSON, ALAN R

835 ROYALWOOD LANE

OVIEDO, FL 32765 US

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: ALAN R. ANDERSON 04/16/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete ANDERSON, ALAN R ANDERSON, ALAN Name: Name: 835 ROYALWOOD LANE Address: 835 ROYALWOOD LANE Address: City-St-Zip: OVIEDO, FL 32765 City-St-Zip: OVIEDO, FL 32765 Title: () Delete Title: () Change () Addition ANDERSON, KAREN Name: Name: Address: 835 ROYALWOOD LANE Address: City-St-Zip: OVIEDO, FL 32765 City-St-Zip: Title: SECR Title: () Change () Addition () Delete NEITA, LANA Name: Name: 1821 STOCKTON DRIVE Address: Address: City-St-Zip: SANFORD, FL 32771 City-St-Zip: Title: TR () Delete Title: () Change () Addition Name: NEITA, LANA Name: 1821 STOCKTON DRIVE Address: Address: City-St-Zip: SANFORD, FL 32771 City-St-Zip: Title: DIR () Delete Title: () Change () Addition GONZALEZ, RAFAEL Name: Name: 1592 THORNHILL CIRCLE Address: Address: City-St-Zip: OVIEDO, FL 32765 City-St-Zip: Title: () Delete Title: () Change () Addition JONES, SOLOMAN Name: Name: Address: 10657 LEADER LANE Address: ORLANDO, FL 32825 City-St-Zip: City-St-Zip:

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: ALAN R. ANDERSON P 04/16/2009