

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 09, 2008
Secretary of State

DOCUMENT# N07000004414

Entity Name: VICTORY IN THE WORD INC

Current Principal Place of Business:

New Principal Place of Business:

10119 ROCKDALE DRIVE
LEESBURG, FL 34788 US

Current Mailing Address:

New Mailing Address:

10119 ROCKDALE DRIVE
LEESBURG, FL 34788 US

FEI Number: 26-0141514 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MAYORGA, AUGUST C
243 W KENNEDY BLVD
SUITE C
ORLANDO, FL 328106200 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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete
Name: REAVES, MYRON F
Address: 10119 ROCKDALE DRIVE
City-St-Zip: LEESBURG, FL 34788 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Delete
Name: REAVES, VALERIE B
Address: 10119 ROCKDALE DRIVE
City-St-Zip: LEESBURG, FL 34788 US

Title: () Change () Addition
Name:
Address:
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: MYRON F REAVES

P

07/09/2008

Electronic Signature of Signing Officer or Director

_____ Date