

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003027

FILED
May 19, 2009
Secretary of State

Entity Name: WOMEN OF VICTORY MINISTRIES, INC.

Current Principal Place of Business:

141 ORANGE PARK RD #161
ORANGE PARK, FL 32073

New Principal Place of Business:

Current Mailing Address:

PO BOX 896
ORANGE PARK, FL 32067

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **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:

SMITH, SYLVIA A
141 ORANGE PARK RD #161
ORANGE PARK, FL 32073 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:

Title: P () Delete
Name: SMITH, SYLVIA A
Address: 141 ORANGE PARK RD #161
City-St-Zip: ORANGE PARK, FL 32073

Title: T () Delete
Name: YOUMANS, CLAUDIA
Address: 3334 BROOKLYN HOMES ANNEX
City-St-Zip: BRUNSWICK, GA 31520

Title: S () Delete
Name: HUGHES, SIMONE
Address: 92 HOPKINS HOMES
City-St-Zip: BRUNSWICK, GA 31520

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:

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: SYLVIA SMITH

P

05/19/2009

Electronic Signature of Signing Officer or Director

Date