## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N08000005018

Entity Name: VICTORY OUTREACH-NORTH MIAMI, INC.

FILED Jan 20, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1145 NW 125TH STREET 827 NW 62ND ST. MIAMI, FL 33150 NORTH MIAMI, FL 33168 **Current Mailing Address: New Mailing Address:** PO BOX 610187 NORTH MIAMI, FL 33261 FEI Number: 26-2659223 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: MOSS, FRANKLIN E SR 1145 NW 125TH STREET NORTH MIAMI, FL 33168 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: (X) Change ( ) Addition () Delete MOSS, FRANKLIN E SR. MOSS, FRANKLIN E SR. Name: Name: 1145 NW 125TH STREET Address: 1145 NW 125TH STREET Address: City-St-Zip: NORTH MIAMI, FL 33168 City-St-Zip: NORTH MIAMI, FL 33168 Title: () Delete Title: (X) Change ( ) Addition MOSS, VALENCIA M Name: MOSS, VALENCIA M Name: Address: 1145 NW 125TH STREET Address: 1145 NW 125TH STREET City-St-Zip: NORTH MIAMI, FL 33168 City-St-Zip: NORTH MIAMI, FL 33168 Title: () Delete Title: () Change () Addition DEPORTO, ERNEST Name: Name: Address: 1145 NW 125TH STREET Address: City-St-Zip: NORTH MIAMI, FL 33168 City-St-Zip: Title: () Delete Title: ( ) Change (X) Addition JANOS, ROBERT Name: Name: 2753 NW 45TH ST. Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33142 Title: () Delete Title: ( ) Change (X) Addition RIVERA, MARGARET Name: Name: 1591 NE MIAMI GARDENS DR. UNIT 2 Address: Address: City-St-Zip: City-St-Zip: NORTH MIAMI, FL 33179

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: VALENCIA MOSS T 01/20/2009