

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000333

FILED  
Apr 26, 2006  
Secretary of State

**Entity Name:** VICTORY TABERNACLE OF PRAISE MINISTRIES, INC.

**Current Principal Place of Business:**

9378 ARLINGTON EXPWY  
#312  
JACKSONVILLE, FL 32210

**New Principal Place of Business:**

**Current Mailing Address:**

9378 ARLINGTON EXPWY  
#312  
JACKSONVILLE, FL 32210

**New Mailing Address:**

**FEI Number:** 59-3348159

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

PRESSLEY, DONALD M SR.  
1212 JOSEPH STREET  
JACKSONVILLE, FL 322064009 US

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

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: CDP ( ) Delete  
Name: PRESSLEY, DONALD M SR.  
Address: 1260 LORENTO ST  
City-St-Zip: JACKSONVILLE, FL

Title: TD ( ) Delete  
Name: KEYE, JOSIE  
Address: 2244 COUNTEY DRIVE  
City-St-Zip: JACKSONVILLE, FL

Title: FD ( ) Delete  
Name: PRESSLEY, BELINDA J  
Address: 1260 LORENTO ST  
City-St-Zip: JACKSONVILLE, FL

Title: D ( ) Delete  
Name: JONES, ELDON V MIN  
Address: 909 PARK FOREST LANE  
City-St-Zip: JACKSONVILLE, FL 32211

Title: D ( ) Delete  
Name: PRESSLEY, RONALD JR  
Address: 6304 EAT WOOD LANE  
City-St-Zip: JACKSONVILLE, FL 32211

Title: ATDP ( ) Delete  
Name: JONES, NICOLE  
Address: 909 PARK FOREST LANE  
City-St-Zip: JACKSONVILLE, FL 32211

**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:

Title: D (X) Change ( ) Addition  
Name: JONES, ELDON V ELDER  
Address: 909 PARK FOREST LANE  
City-St-Zip: JACKSONVILLE, FL 32211

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 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: DONALD M. PRESSLEY, SR

CDP

04/26/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date