

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N96000002273

FILED
Nov 14, 2008
Secretary of State

Entity Name: VICTORY TABERNACLE A.F.B. INC.

Current Principal Place of Business:

6043 KIMBERLY BLVD
L 8M
NORTH LAUDERDALE, FL 33068

New Principal Place of Business:

3830 SW 2ND CT
FT. LAUDERDALE, FL 33312

Current Mailing Address:

1106 NW 46 AVENUE
LAUDERHILL, FL 33313

New Mailing Address:

1101 NW 46 AVENUE
LAUDERHILL, FL 33313

FEI Number: 65-0661508 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

GRANT, DR. ROLAND
1101 N.W. 46TH AVE.
LAUDERHILL, FL 33313 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: ROLAND GRANT

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GRANT, ROLAND PAST
Address: 1101 NW 46TH AVE
City-St-Zip: LAUDERHILL, FL 33313

Title: D () Delete
Name: ARDEN, LARMOND
Address: 631 SW 72 AVENUE
City-St-Zip: PEMBROKE PINES, FL 33023

Title: D () Delete
Name: GRANT, CLAUDETTE
Address: 1101 NW 46 AVE
City-St-Zip: LAUDERHILL, FL 33313

Title: S () Delete
Name: FARQUHARSON, GENE
Address: 5881 N PLUMBAY DR.
City-St-Zip: FORT LAUDERDALE, FL 33321

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: WILLIAMS, AUDREY SECY
Address: 8173 N UNIVERSITY DR, UNIT 84
City-St-Zip: TAMARAC, FL 33321

Title: O (X) Change () Addition
Name: GRANT, CLAUDETTE
Address: 1101 NW 46 AVE
City-St-Zip: LAUDERHILL, FL 33313

Title: O (X) Change () Addition
Name: FARQUHARSON, GENE
Address: 5881 N PLUMBAY DR.
City-St-Zip: FORT LAUDERDALE, FL 33321

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: ROLAND GRANT

Electronic Signature of Signing Officer or Director

D

11/14/2008

Date