

2009
CORPORATION
Annual Report



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N98000005853

1. Corporation Name

Victory Praise + Worship Center, Inc

2. Principal Office Address - No P.O. Box #

128 Main St.

Suite, Apt. #, etc.

3. Mailing Office Address

P.O. Box 817

Suite, Apt. #, etc.

City & State

Bowling Green, Fla

Zip

33834

Country

Hardee

City & State

Bowling Green, Fla

Zip

33834

Country

Hardee

4. Date Incorporated or Qualified
To Do Business in Florida

10/14/98

5. FEI Number

65-0872135

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$5.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Smith, Walter M.

Street Address (P.O. Box Number is Not Acceptable)

128 Main Street

Suite, Apt. #, Etc.

City

Bowling Green

State

FL

Zip Code

33834

☐ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0606 or 617.0503, F.S.

Signature of
Registered Agent

Walter M. Smith

Date 3/2/09

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Ptd	Smith, Walter M	128 Main St.	Bowling Green, Fla 33834
VO	Sconyers, Huey	3865 Peoples Rd.	H Meade, Fla 33841
D	Tommy, Granger	3426 E. Main St	Wauchula, Fla 33873

900145146909
03/06/09--01027--011 **175.00

61.25

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Walter M. Smith SMITH, Walter M.

Date

375-2879

Daytime Phone #

900145146909
05/05/09--01040--027 **306.25

5/20