

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2008
Secretary of State

DOCUMENT# N99000001776

Entity Name: VICTORY MINISTRIES ORGANIZATION, INC.

Current Principal Place of Business:

1967 SW SYLVESTER LANE
PORT SAINT LUCIE, FL 34984

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 7847
PT. ST. LUCIE, FL 34985

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

KENDALL, RICHARD L
1967 SW SYLVESTER LANE
PORT SAINT LUCIE, FL 34984 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:

Title: PD () Delete
Name: KENDALL, RICHARD L
Address: 1967 SW SYLVESTER LANE
City-St-Zip: PORT SAINT LUCIE, FL 34984

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

Title: VPD () Delete
Name: KENDALL, ELIZABETH
Address: 1967 SW SYLVESTER LANE
City-St-Zip: PORT SAINT LUCIE, FL 34984

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

Title: TD () Delete
Name: KENDALL, ELIZABETH
Address: 1967 SW SYLVESTER LANE
City-St-Zip: PORT SAINT LUCIE, FL 34984

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

Title: TD () Delete
Name: TEEPE, MARK W
Address: 1974 PRIMROSE LANE
City-St-Zip: WELLINGTON, FL 33414

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

Title: TD () Delete
Name: TEEPE, TERESA
Address: 1974 PRIMROSE LANE
City-St-Zip: WELLINGTON, FL 33414

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: RICHARD L. KENDALL

PD

05/04/2008

Electronic Signature of Signing Officer or Director

Date