

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000007326

FILED  
Apr 30, 2003  
Secretary of State

**Entity Name:** VICTORIOUS LIVING WORD & WORSHIP CENTER INC.

**Current Principal Place of Business:**

5553 N STATE RD 7  
FORT LAUDERDALE, FL 33319

**New Principal Place of Business:**

2971 N. POWERLINE RD.  
POMPANO BEACH, FL 33069

**Current Mailing Address:**

P.O. BOX 590224  
FT. LAUDERDALE, FL 33359

**New Mailing Address:**

**FEI Number:** 65-0966011

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DENTLEY, CHARMAYNE  
19370 COLLINS AVE.  
SUNNY ISLES BEACH, FL 33160

**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: P ( ) Delete  
Name: DENTLEY, KENNETH  
Address: 19370 COLLINS AVE. #501  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: D ( ) Delete  
Name: SANDY, JENNIFER  
Address: 2971 POWERLINE RD  
City-St-Zip: POMPAÑO BEACH, FL 33069

Title: STA ( ) Delete  
Name: DENTLEY, CHARMAYNE  
Address: 19370 COLLINS AVE. #501  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: T ( ) Delete  
Name: JONES, VANREA  
Address: 721 E EVANSTON CIRCLE  
City-St-Zip: FORT LAUDERDALE, FL 33312

**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: ( ) 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 Section 119.07(3)(i), 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: CHARMAYNE DENTLEY

STA

04/30/2003

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date