Current Mailir	g Address:		
P.O. BOX 2910 PORT ORANG	075 E, FL 32129-1075		
FEI Number: {	59-3579057		Certificate of Status Desired
Name and Address of Current Registered Agent:			
VICTORIOUS LIFE CHURCH 3489 S CLYDE MORRIS BLVD PORT ORANGE, FL 32129 US			
The above named e	ntity submits this statement for the p	urpose of changing its registered office o	or registered agent, or both, in the State of Florida.
SIGNATURE:			
	Electronic Signature of Registe	red Agent	

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0800009392

Entity Name: VICTORIOUS LIFE CHURCH OF PORT ORANGE, FLORIDA, INC.

Current Principal Place of Business:

3489 S. CLYDE MORRIS BLVD PORT ORANGE, FL 32129

Officer/Director Detail : Title ST Title D Name CARR, LOIS M Name LINDLEY, JOHN Address P.O. BOX 290334 Address 4737 CHARDONNAY LN City-State-Zip: PORT ORANGE FL 32129 City-State-Zip: PORT ORANGE FL 32129 Title D Title PC Name CRANE, RICHARD Name FINKEN, THOMAS 5968 PLANTERA COURT Address 705 BRANCH DRIVE Address City-State-Zip: PORT ORANGE FL 32127 City-State-Zip: PORT ORANGE FL 32127 Title D Name SALICRUP. ISMAEL 1514 SAN JOSE BLVD. Address City-State-Zip: HOLLY HILL FL 32117

I hereby 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 all other like empowered.

SIGNATURE: THOMAS FINKEN

PASTOR

02/06/2015

Date

Electronic Signature of Signing Officer/Director Detail

Date

FILED Feb 06, 2015 Secretary of State CC9152726105

of Status Desired: No