

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005602

FILED  
Jan 05, 2007  
Secretary of State

Entity Name: MINISTRY OF PRESENCE, INC.

**Current Principal Place of Business:**

P.O. BOX 784  
ONECO, FL 34264

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 784  
ONECO, FL 34264

**New Mailing Address:**

FEI Number: 65-1065786      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

DELEGATO, MARGARET  
2913 PARK LAKE DRIVE  
BRADENTON, FL 34209      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: BOGER, DONALD JR.  
Address: 1706 N E 2ND AVENUE  
City-St-Zip: CAPE CORAL, FL 33909

Title: VP      (X) Delete  
Name: JOYCE, CATHERINE  
Address: 5827 FISHERMANS DR.  
City-St-Zip: BRADENTON, FL 34209

Title: T      ( ) Delete  
Name: DELEGATO, MARGARET  
Address: 2913 PARK LAKE DR.  
City-St-Zip: BRADENTON, FL 34209

Title: S      ( ) Delete  
Name: DENIS, LINDA  
Address: 111 15TH AVE. CIR. W.  
City-St-Zip: BRADENTON, FL 34205

Title: D      ( ) Delete  
Name: MCNALLY, BARBARA  
Address: 3413 57TH AVE. W.  
City-St-Zip: BRADENTON, FL 34210

Title: D      (X) Delete  
Name: LEMUS, BRENDA  
Address: 306 11TH AVE. EAST  
City-St-Zip: BRADENTON, FL 34221

**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:

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 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: MARGARET DELEGATO

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

TREA

01/05/2007

\_\_\_\_\_  
Date