

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005602

FILED
Jan 13, 2011
Secretary of State

Entity Name: MINISTRY OF PRESENCE, INC.

Current Principal Place of Business:

4102 39TH AVE W
BRADENTON, FL 34205

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 (X)

Name and Address of Current Registered Agent:

SCHUERMANN, NORMAN D
4102 39TH AVE W
BRADENTON, FL 34205 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: DIR
Name: BOGER, DONALD JR.
Address: 1706 N E 2ND AVENUE
City-St-Zip: CAPE CORAL, FL 33909

Title: TRES
Name: JOY, BONNER
Address: 5404 MARINA DR.
City-St-Zip: HOLMES BEACH, FL 34217

Title: VP
Name: DENIS, LINDA
Address: 603 12TH STREET WEST
City-St-Zip: PALMETTO, FL 34221

Title: PRES
Name: SCHUERMANN, NORMAN D
Address: 4102 39TH AVE WEST
City-St-Zip: BRADENTON, FL 34205

Title: DIR
Name: MOORE, SISTER DIANNE SC
Address: 30255 MOUNT VERNON ROAD
City-St-Zip: PRINCESS ANNE, MD 21853

Title: SEC
Name: WORKMAN, BARBARA L
Address: 3917 42 ND ST. W
City-St-Zip: BRADENTON, FL 34205

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: NORMAN D SCHUERMANN

PRES

01/13/2011

Electronic Signature of Signing Officer or Director

Date