2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2005
Secretary of State

DOCUMENT# N04000003193

Entity Name: IN HIS PRESENCE MINISTRIES, LEESBURG, INC.

Current Principal Place of Business:

33741 S HAINES CREEK ROAD
LEESBURG, FL 34789

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 682814
ORLANDO, FL 32868

New Mailing Address:

FEI Number: 20-0541050 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CLEVELAND, JOHN J
7115 GRAY SHADOW STREET
ORLANDO, FL 328188350 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:	CLEVELAND, JOHN J	
Address:	7115 GRAY SHADOW STREET	
City-St-Zip:	ORLANDO, FL 328188350	
Title:	VT	( ) Delete
Name:	CLEVELAND, VINEY	
Address:	7115 GRAY SHADOW STREET	
City-St-Zip:	ORLANDO, FL 328188350	
Title:	D	( ) Delete
Name:	CLEVELAND, WILLIE	
Address:	5457 TIMBERLEAF BLVD. #606	
City-St-Zip:	ORLANDO, FL 32811	
Title:	S	( ) Delete
Name:	WASHINGTON, SHARON	
Address:	7115 GRAY SHADOW STREET	
City-St-Zip:	ORLANDO, FL 328188350	
Title:	S	( ) Delete
Name:	CLEVELAND, ETHARINE	
Address:	5457 TIMBERLEAF BLVD. #606	
City-St-Zip:	ORLANDO, FL 32811	
Title:	D	( ) Delete
Name:	CLEVELAND, JULIAN	
Address:	6113 WESTGATE DRIVE #1402	
City-St-Zip:	ORLANDO, FL 32835	

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 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: VINEY CLEVELAND VT 01/11/2005

Electronic Signature of Signing Officer or Director — Date