

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003193

FILED  
Apr 24, 2007  
Secretary of State

**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: D (X) Change ( ) Addition  
Name: CLEVELAND, JULIAN  
Address: 6905 KNIGHTSWOODS DRIVE  
City-St-Zip: ORLANDO, FL 32818

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: JOHN J. CLEVELAND

P

04/24/2007

Electronic Signature of Signing Officer or Director

Date