

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000008876

FILED  
Jan 18, 2012  
Secretary of State

**Entity Name:** HIS PRESENCE AND GLORY MINISTRIES, INC.

**Current Principal Place of Business:**

8862 US HWY ONE  
PORT ST LUCIE, FL 34952

**New Principal Place of Business:**

7302 FEDERAL HWY US-1  
PORT ST LUCIE, FL 34983

**Current Mailing Address:**

P O BOX 8734  
PORT ST LUCIE, FL 34985

**New Mailing Address:**

**FEI Number:** 27-3727009

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FARRELL, RICKEY L  
1595 SE PORT LUCIE BLVD  
PORT ST LUCIE, FL 34952 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: PD  
Name: WEST, CYNTHIA M  
Address: 1173 SW GAFFNEY AVE  
City-St-Zip: PORT ST LUCIE, FL 34953

Title: TD  
Name: TORREGROSA, ANDREA L  
Address: 2149 SE ANECI ST  
City-St-Zip: PORT ST LUCIE, FL 34953

Title: SD  
Name: DITERLIZZI, JODI  
Address: 1340 SW DYER PT RD  
City-St-Zip: PALM CITY, FL 34990

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: CYNTHIA WEST

PD

01/18/2012

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

\_\_\_\_\_  
Date