

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 31, 2007
Secretary of State

DOCUMENT# N32823

Entity Name: THE HOLY LAND EXPERIENCE MINISTRIES, INC.**Current Principal Place of Business:**4655 VINELAND ROAD
ORLANDO, FL 32811 US**New Principal Place of Business:****Current Mailing Address:**P O BOX 690909
ORLANDO, FL 32869 US**New Mailing Address:****FEI Number:** 59-2976410**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MEIER, GREGORY W ESQ
1000 LEGION PLACE, SUITE 1700
ORLANDO, FL 32801 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:** CD () Delete
Name: PIERRE, SCOTT
Address: 4655 VINELAND ROAD
City-St-Zip: ORLANDO, FL 32811**Title:** D () Delete
Name: HAYDEN, DANIEL
Address: 4655 VINELAND ROAD
City-St-Zip: ORLANDO, FL 32811**Title:** D () Delete
Name: TEASDALE, PAUL,
Address: 4655 VINELAND ROAD
City-St-Zip: ORLANDO, FL 32811**Title:** D () Delete
Name: TEASDALE, JAMES,
Address: 4655 VINELAND ROAD
City-St-Zip: ORLANDO, FL 32811**Title:** TCFO () Delete
Name: POWELL, THOMAS E
Address: 4655 VINELAND ROAD
City-St-Zip: ORLANDO, FL 32811**Title:** DP () Delete
Name: GILBERT, DENNIS
Address: 4655 VINELAND RD
City-St-Zip: ORLANDO, FL 32811**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** CD (X) Change () Addition
Name: CROUCH, PAUL F
Address: 4655 VINELAND ROAD
City-St-Zip: ORLANDO, FL 32811**Title:** DP (X) Change () Addition
Name: CROUCH, PAUL F JR.
Address: 4655 VINELAND ROAD
City-St-Zip: ORLANDO, FL 32811**Title:** DST (X) Change () Addition
Name: CROUCH, JANICE W
Address: 4655 VINELAND ROAD
City-St-Zip: ORLANDO, FL 32811**Title:** DAS (X) Change () Addition
Name: CROUCH, MATTHEW W
Address: 4655 VINELAND ROAD
City-St-Zip: ORLANDO, FL 32811**Title:** DCEO (X) Change () Addition
Name: POWELL, THOMAS E
Address: 4655 VINELAND ROAD
City-St-Zip: ORLANDO, FL 32811**Title:** AS (X) Change () Addition
Name: CASORIA, JOHN B
Address: 4655 VINELAND ROAD
City-St-Zip: ORLANDO, FL 32811

I hereby certify that the information supplied with this filing does not qualify 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: THOMAS E. POWELL

CEO

07/31/2007

Electronic Signature of Signing Officer or Director

Date