

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000005602

**FILED**  
**Jan 23, 2013**  
**Secretary of State**  
**CC3061303577**

**Entity Name:** MINISTRY OF PRESENCE, INC.

**Current Principal Place of Business:**

4102 39TH AVE W  
BRADENTON, FL 34205

**Current Mailing Address:**

P.O. BOX 784  
ONECO, FL 34264

**FEI Number: 65-1065786**

**Certificate of Status Desired: Yes**

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

SCHUERMANN, NORMAN D  
4102 39TH AVE W  
BRADENTON, FL 34205 US

*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

**Officer/Director Detail :**

Title            DIR  
Name            BOGER, DONALD JR.  
Address        1706 N E 2ND AVENUE  
City-State-Zip: CAPE CORAL FL 33909

Title            DIR  
Name            MCMANUS, CECILIA SC  
Address        30255 MOUNT VERNON ROAD  
City-State-Zip: PRINCESS ANNE MD 21853

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

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

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

Title            TREASURER DIRECTOR  
Name            JOY, BONNER  
Address        5404 MARINA DRIVE  
City-State-Zip: HOLMES BEACH FL 34217

*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 DENNIS SCHUERMANN**

**PRESIDENT**

**01/23/2013**

Electronic Signature of Signing Officer/Director Detail

Date