2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005
Secretary of State

DOCUMENT# 747890

Entity Name: NEW JERUSALEM, U.S.A. INCORPORATED

Current Principal Place of Business:

3900 NEW JERUSALEM ROAD
VERNON, FL 32462 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 525
VERNON, FL 324627525 US

New Mailing Address:

P. O. BOX 838
LYNN HAVEN, FL 32444 US

FEI Number: 59-2069556 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MOORE, ARVIN C.
P.O. BOX 525 , 3900 NEW JERUSALEM ROAD
VERNON, FL 32462 US

Name and Address of New Registered Agent:

MOORE, ARVIN C
3189 PIONEER ROAD
VERNON, FL 32462 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: ARVIN C. MOORE 04/25/2005
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PDT ( ) Delete
Name: MOORE, ARVIN C
Address: 3189 PIONEER ROAD
City-St-Zip: VERNON, FL

Title: VD ( ) Delete
Name: MOORE, LARRY D
Address: 391 RADEBAUGH COURT
City-St-Zip: LONGWOOD, FL 32750

Title: SD ( ) Delete
Name: GREEN, PATRICIA I
Address: 580 FIRST STREET
City-St-Zip: CHIPLEY, FL 32428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDT (X) Change ( ) Addition
Name: MOORE, ARVIN C
Address: 3189 PIONEER ROAD
City-St-Zip: VERNON, FL 32462

Title: VD (X) Change ( ) Addition
Name: MOORE, ALAN H
Address: 915 DELAWARE AVE
City-St-Zip: LYNN HAVEN, FL 32444

Title: SD (X) Change ( ) Addition
Name: MOORE, ALICE H
Address: 3189 PIONEER ROAD
City-St-Zip: VERNON, FL 32462

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: ARVIN C. MOORE PRES 04/25/2005
Electronic Signature of Signing Officer or Director Date