

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004379

FILED
Apr 28, 2008
Secretary of State

Entity Name: THE BELIEVERS USA, INC.

Current Principal Place of Business:

2913 BERNICE DR.
JACKSONVILLE, FL 32257

New Principal Place of Business:

8493 BAYMEADOWS WAY #5
JACKSONVILLE, FL 32256

Current Mailing Address:

2913 BERNICE DR.
JACKSONVILLE, FL 32257

New Mailing Address:

8493 BAYMEADOWS WAY #5
JACKSONVILLE, FL 32256

FEI Number: 59-3587368

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEEHNER, JOHN
2913 BERNICE DR.
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

BEEHNER, JOHN
8493 BAYMEADOWS WAY #5
JACKSONVILLE, FL 32256 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:

04/28/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BEEHNER, JOHN
Address: 2913 BERNICE DR.
City-St-Zip: JACKSONVILLE, FL 32257

Title: VD () Delete
Name: MCCOMBES, BILL
Address: 11728 MCCORMICK RD.
City-St-Zip: JACKSONVILLE, FL 32225

Title: STD () Delete
Name: BEENER, JUDY
Address: 2913 BERNICE DR.
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BEEHNER, JOHN
Address: 8493 BAYMEADOWS WAY #5
City-St-Zip: JACKSONVILLE, FL 32256

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOHN F. BEEHNER

PRES

04/28/2008

Electronic Signature of Signing Officer or Director

Date