2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 615392

Entity Name: CHALLENGER ENTERPRISES, INC.

FILED Feb 07, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

446 6TH STREET SOUTH 5600 MOSSBERG DRIVE

SAFETY HARBOR, FL 34695 US NEW PORT RICHEY, FL 34655 US

Current Mailing Address: New Mailing Address:

P.O. BOX 285

SAFETY HARBOR, FL 346950285 US

FEI Number: 59-1898447 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

NICHOLSON, ANDREW M
3411 BRIARWOOD LN
NICHOLSON, ANDREW M
5600 MOSSBERG DRIVE

SAFETY HARBOR, FL 346950935 US NEW PORT RICHEY, FL 34655 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: ANDREW M. NICHOLSON 02/07/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition NICHOLSON, ANDREW M NICHOLSON, ANDREW M Name: Name: 3411 BRIARWOOD LANE 5600 MOSSBERG DRIVE Address: Address: City-St-Zip: SAFETY HARBOR, FL 34695 City-St-Zip: NEW PORT RICHEY, FL 34655

Title: S () Delete Title: S (X) Change () Addition

 Name:
 NICHOLSON, ANDREA C
 Name:
 NICHOLSON, ANDREA C

 Address:
 3411 BRIARWOOD LANE
 Address:
 5600 MOSSBERG DRIVE

 City-St-Zip:
 SAFETY HARBOR, FL 34695
 City-St-Zip:
 NEW PORT RICHEY, FL 34655

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANDREW M. NICHOLSON PTD 02/07/2007