

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 724466

**FILED**  
**Mar 29, 2010**  
**Secretary of State**

**Entity Name:** CHALLENGE ENTERPRISES OF NORTH FLORIDA, INC.

**Current Principal Place of Business:**

3530 ENTERPRISE WAY  
GREEN COVE SPRINGS, FL 32043

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1248  
GREEN COVE SPRINGS, FL 32043

**New Mailing Address:**

**FEI Number:** 59-1478621      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

KOPELOUSOS, JOHN  
1269 KINGSLEY AVENUE  
ORANGE PARK, FL 32073      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:** P  
**Name:** OAKES, GLEN D  
**Address:** 7732 RIVER AVE.  
**City-St-Zip:** GREEN COVE SPRINGS, FL 32043 US

**Title:** S/T  
**Name:** KELLY, EDWARD  
**Address:** 200 W. FORSYTH STREET  
**City-St-Zip:** JACKSONVILLE, FL 32201 US

**Title:** D  
**Name:** DASHER, BONITA CPA  
**Address:** 401 WALNUT STREET  
**City-St-Zip:** GREEN COVE SPRINGS, FL 32043 US

**Title:** D  
**Name:** POWERS, WILLIAM  
**Address:** 578 GOLDEN LENGTH DRIVE  
**City-St-Zip:** ORANGE PARK, FL 32003 US

**Title:** D  
**Name:** SIMPSON, TIM  
**Address:** 801 OAK STREET  
**City-St-Zip:** GREEN COVE SPRINGS, FL 32043 US

**Title:** VP  
**Name:** KOPELOUSOS, JOHN  
**Address:** 1269 KINGSLEY AVENUE  
**City-St-Zip:** ORANGE PARK, FL 32073

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:** NANCY C. KEATING

ED

03/29/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date