2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F78370

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

901 S.W. 9TH TERR

ELDER, DEREK

2900 NE 22ND CT

FT. LAUDERDALE, FL

(X) Delete

POMPANO BEACH, FL 33062

FILED Apr 26, 2004 Secretary of State

DOCON		3/0				Seci	letary or State
Entity Nar	me: CHALLEN	NGE WA	REHOUSING, INC.				
Current Principal Place of Business:				New Principal Place of Business:			
1217 S.W. FT LAUDE	1ST AVE ERDALE, FL 3:	3315	US				
Current Mailing Address:				New Mailing Address:			
1217 S.W. FT LAUDE	1ST AVE ERDALE, FL 3:	3315	US				
FEI Number:	: 59-2199168	FEI Nu	mber Applied For()	FEI Number Not App	licable()	Certific	ate of Status Desired ()
Name and	Address of C	urrent	Registered Agent:	Name and	Address of	New Reg	gistered Agent:
ELDER, IA 1217 SW 1 FT LAUDE		3315	US				
	named entity s e of Florida.	submits	this statement for the p	ourpose of changing i	its registered	office or	registered agent, or both,
SIGNATUR	RE:						
		nic Signa	ture of Registered Ag	ent			Date
Election Car	mpaign Financing	g Trust Fo	und Contribution ().				
OFFICERS	S AND DIREC	TORS:		ADDITION	IS/CHANGE	S TO OF	FICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	P () ELDER, IAN 2013 S.E. 17TH POMPANO BEA			Title: Name: Address: City-St-Zip:	P (ELDER, IAN 2013 S.E. 17 LAUD-BY-TH	тнст	() Addition
Title: Name: Address: City-St-Zip:		Delete RTA CT		Title: Name: Address: City-St-Zip:		(X) Change ERTA H COURT	() Addition
Title: Name: Address: City-St-Zip:	D () GREEN, ANITA 1945 PLAYERS NORTH LAUDE	PLACE	L	Title: Name: Address: City-St-Zip:	D (GREEN, ANIT 1947 SE 17T LAUD-BY-TH	A, H COURT	() Addition 33062
Title: Name:	VP () ELDER-O'DRIS	Delete	LIE	Title: Name:	VP (ELDER-O'DR	-	()Addition JLIE

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

901 S.W. 9TH TERR

FT. LAUDERDALE, FL 33315

() Change () Addition

SIGNATURE: IAN ELDER P 04/26/2004