2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000000466

Entity Name: CHALLENGER LIFTS, INC.

1700 PARK SHORE RD.

LAGRANGE, KY 40031

Address:

City-St-Zip:

FILED Jul 11, 2008 Secretary of State

Littly Name: Challenger Eli-13, INC.					
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
200 CABEL LOUISVILL	STREET E, KY 40206				
Current M	ailing Addres	s:	New Mailing Address:	New Mailing Address:	
P.O. BOX 3944 LOUISVILLE, KY 402013944			P.O. BOX 3944 LOUISVILLE, KY 40201	US	
FEI Number:	61-1225957	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of N	Name and Address of New Registered Agent:	
LENTZ JR, JOSEPH A 8422 INDIAN WELLS WAY NAPLES, FL 34113 US				12414 30TH STREET CIRCLE EAST	
The above in the State		submits this statement for the pu	rpose of changing its registered o	ffice or registered agent, or both,	
SIGNATURE:				07/11/2008	
	Electron	ic Signature of Registered Ager	t	Date	
		3(2)(b), F.S., the corporation did not Trust Fund Contribution ().	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CFO () LENTZ, JEROM 709 FARMINGH LOUISVILLE, K	IAM RD.	Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	COO () REAVIS, DAVID 205 STILLWOO LOUISVILLE, K	DD CT.	Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	S () ROBINSON, PH 10220 GLENMA LOUISVILLE, K	ARY FARM	Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name:	D () BRYANT, MILO	Delete D	Title: () Name:	Change () Addition	

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

Address:

City-St-Zip:

SIGNATURE: JEROME L. LENTZ CFO 07/11/2008