

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000000466

Entity Name: CHALLENGER LIFTS, INC.

FILED
Feb 24, 2009
Secretary of State

Current Principal Place of Business:

200 CABEL STREET
LOUISVILLE, KY 40206

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3944
LOUISVILLE, KY 40201 US

New Mailing Address:

FEI Number: 61-1225957

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LENTZ JR, JOSEPH A
12414 30TH STREET CIRCLE EAST
PARRISH, FL 34219 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CFO () Delete
Name: LENTZ, JEROME L
Address: 709 FARMINGHAM RD.
City-St-Zip: LOUISVILLE, KY 40243

Title: COO () Delete
Name: REAVIS, DAVID R
Address: 205 STILLWOOD CT.
City-St-Zip: LOUISVILLE, KY 40223

Title: S () Delete
Name: ROBINSON, PHYLLIS A
Address: 10220 GLENMARY FARM
City-St-Zip: LOUISVILLE, KY 40291

Title: D () Delete
Name: BRYANT, MILO D
Address: 1700 PARK SHORE RD.
City-St-Zip: LAGRANGE, KY 40031

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

SIGNATURE: JEROME L LENTZ

CFO

02/24/2009

Electronic Signature of Signing Officer or Director

Date