

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996		 FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 1. Corporation Name <i>K83828</i> <i>Challenger Home Inc</i>			
Principal Place of Business <i>2250 Duane St</i> <i>Merriett Island, FL 32952</i>		Mailing Address	
2. Principal Place of Business 21 State Apt # etc 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 State Apt # etc 27 City & State 28 Zip 29 Country	
3. Date of Incorporation or Qual Fed		3a. Date of Last Report	
4. FEI Number <i>592945518</i>		Applicable Tax Application	
5. Certificate of Status Desired		☐ \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution		☐ \$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 193.04, Florida Statutes		☐ Yes ☐ No	
9. Name and Address of Current Registered Agent <i>William T. Raynor Jr</i> <i>2250 Duane St</i> <i>Merriett Island, FL 32952</i>		10. Name and Address of New Registered Agent	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.		81 Name 82 Street Address (P.O. Box Number is Not Accepted) 83 84 City FL 85 Zip Code	
SIGNATURE Signature typed or printed name of registered agent for this corporation <i>W. T. Raynor Jr</i>		SIGNATURE Signature typed or printed name of person designated when registered <i>W. T. Raynor Jr</i>	
12. OFFICERS AND DIRECTORS 1. TITLE NAME STREET ADDRESS CITY, ST, ZIP 2. TITLE NAME STREET ADDRESS CITY, ST, ZIP 3. TITLE NAME STREET ADDRESS CITY, ST, ZIP 4. TITLE NAME STREET ADDRESS CITY, ST, ZIP 5. TITLE NAME STREET ADDRESS CITY, ST, ZIP 6. TITLE NAME STREET ADDRESS CITY, ST, ZIP		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 1. TITLE NAME STREET ADDRESS CITY, ST, ZIP 2. TITLE NAME STREET ADDRESS CITY, ST, ZIP 3. TITLE NAME STREET ADDRESS CITY, ST, ZIP 4. TITLE NAME STREET ADDRESS CITY, ST, ZIP 5. TITLE NAME STREET ADDRESS CITY, ST, ZIP 6. TITLE NAME STREET ADDRESS CITY, ST, ZIP	
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information included on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.		700001872477 -06/24/96--01019--044 ***225.00	
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR <i>W. T. Raynor Jr</i>		6-21-96 JR	

CR2E034 (12/95)