## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000004636

FILED Jan 03, 2006 Secretary of State

Entity Name: PHYSICALLY CHALLENGED SPORTS FOUNDATION, INC.

Current P	rincipal Plac	e of Business:	New Principal Place	New Principal Place of Business:	
	TIONSIDE DR ), FL 34787	RIVE			
Current Mailing Address:			New Mailing Addr	New Mailing Address:	
	TIONSIDE DR D, FL 34787	RIVE			
FEI Number	: 59-3729378	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	d Address of	Current Registered Agent:	Name and Address	s of New Registered Agent:	
	JEFF TIONSIDE DR D, FL 34787	R US			
	e named entity e of Florida.	submits this statement for the p	urpose of changing its registe	ered office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	onic Signature of Registered Age	nt	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	FINKBEINER,	REST STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ( THOMAS, DAN 790 E LAKE S WINTER PAR	SUE AVE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D ( FISCHER, GA 111 DELLWO LONGWOOD,	OD DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ( SAPPER, JEF 1151 STATION OAKLAND, FL	NSIDE DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ( HOFFMAN, PA 2241 LANGLE ORLANDO, FL	Y CIRCLE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ( TAVRIDES, SI 517 WEST HA ORLANDO, FL	ZEL STREET	Title: Name: Address: City-St-Zip:	()Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEFF SAPPER D 01/03/2006