2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2008
Secretary of State

DOCUMENT# N00000004636

Entity Name: PHYSICALLY CHALLENGED SPORTS FOUNDATION, INC.

Current Principal Place of Business:

1151 STATIONSIDE DRIVE
OAKLAND, FL 34787

New Principal Place of Business:

Current Mailing Address:

1151 STATIONSIDE DRIVE
OAKLLAND, FL 34787

New Mailing Address:

FEI Number: 59-3729378 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SAPPER, JEFF
1151 STATIONSIDE DR
OAKLAND, FL 34787 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

OFFICERS AND DIRECTORS:

Title:	D	( ) Delete
Name:	FINKBEINER, FRANK	
Address:	108 E. HILLCREST STREET	
City-St-Zip:	ORLANDO, FL 32802	
Title:	D	( ) Delete
Name:	THOMAS, DANA	
Address:	790 E LAKE SUE AVE	
City-St-Zip:	WINTER PARK, FL 32787	
Title:	D	( ) Delete
Name:	FISCHER, GARY	
Address:	111 DELLWOOD DR	
City-St-Zip:	LONGWOOD, FL 32750	
Title:	D	( ) Delete
Name:	SAPPER, JEFF	
Address:	1151 STATIONSIDE DR	
City-St-Zip:	OAKLAND, FL 34787	
Title:	D	( ) Delete
Name:	HOFFMAN, PAT	
Address:	2241 LANGLEY CIRCLE	
City-St-Zip:	ORLANDO, FL 32835	
Title:	D	( ) Delete
Name:	TAVRIDES, SHANNON	
Address:	517 WEST HAZEL STREET	
City-St-Zip:	ORLANDO, FL 32804	

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:	
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 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 01/04/2008

Electronic Signature of Signing Officer or Director — Date