

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001292

FILED
Jan 08, 2008
Secretary of State

Entity Name: CHAMPIONS OF HONOR, INC.

Current Principal Place of Business:

5666 FIRESTONE DR
PACE, FL 32571

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 820
GULF BREEZE, FL 325620820

New Mailing Address:

FEI Number: 20-2166479

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BREWSTER, CHARLES A
5666 FIRESTONE DR
PACE, FL 32571 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: BREWSTER, CHARLES A
Address: P.O. BOX 820
City-St-Zip: GULF BREEZE, FL 32562

Title: D () Delete
Name: BREWSTER, RHONDA S
Address: P.O. BOX 820
City-St-Zip: GULF BREEZE, FL 32562

Title: D () Delete
Name: MOREFIELD, GARY
Address: 711 VALE VERDE
City-St-Zip: HENDERSON, NV 89014

Title: D () Delete
Name: MURPHY, JERRY
Address: 197 CO RD 546
City-St-Zip: POPLAR BLUFF, MO 63901

Title: D () Delete
Name: WILLIAMS, LEE
Address: 250 JOHNS RD EAST
City-St-Zip: RADCLIFF, KY 40160

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:

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: CHARLES A. BREWSTER

PRES

01/08/2008

Electronic Signature of Signing Officer or Director

Date