

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2001 8:00 am
Secretary of State

02-26-2001 90539 033 ****61.25

0063192

DOCUMENT # N22684

1. Entity Name

LIFE CHALLENGE, INC.

Principal Place of Business

6922 142ND AVE N
 LARGO FL 33771
 US

Mailing Address

P O BOX 2558
 CLEARWATER FL 34617
 US

33157

160040

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2851802

Applied For

Not Applicable

Zip

Country

Zip

Country

33757

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DORTCH, RICHARD W.
 1621 GULF BLVD.
 STE. #208
 CLEARWATER FL 34630

33767

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
 NAME DORTCH, RICHARD W.
 STREET ADDRESS 1621 GULF BLVD #208
 CITY-ST-ZIP CLEARWATER FL

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D
 NAME WILLIAMS, D
 STREET ADDRESS 202 S CREYTI RD
 CITY-ST-ZIP LANSING MI 48917

☒ Delete

TITLE D
 NAME DEATON, DAVID
 STREET ADDRESS 11735 PLANTATION ROAD
 CITY-ST-ZIP FT. MYERS, FL 33912

☐ Change ☒ Addition

TITLE D
 NAME DORTCH, RICH II
 STREET ADDRESS 13200 HARBOR OAKS LANE
 CITY-ST-ZIP CHARLOTTE NC

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D
 NAME EDWARDS, DALE
 STREET ADDRESS 1026 THORNBURY PL
 CITY-ST-ZIP O FALLON IL 62269

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
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☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Richard W. Dortch*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/14/01 593-8297
 Date Daytime Phone #

CR2E037 (10/00)