

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32617

FILED
Jan 26, 2011
Secretary of State

Entity Name: CHARITY CHALLENGE, INC.

Current Principal Place of Business:

378 CENTERPOINTE CIR.
SUITE 1238
ALTAMONTE SPRINGS, FL 32701 US

New Principal Place of Business:

Current Mailing Address:

378 CENTERPOINTE CIR.
SUITE 1238
ALTAMONTE SPRINGS, FL 32701 US

New Mailing Address:

FEI Number: 59-2944549

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONSTANTINE, DAVID LEE
640 JASMINE RD
ALTAMONTE SPRINGS, FL 32701 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
Name: CONSTANTINE, DAVID LEE
Address: 640 JASMINE RD
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: D
Name: LANSING, MARIANN
Address: 160 HATTAWAY DR
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: D
Name: DURSO, JOSEPH
Address: 301 TULLIS AVE
City-St-Zip: LONGWOOD, FL 32750

Title: D
Name: FINELLI, PAUL
Address: 829 LONGLEAF COURT
City-St-Zip: ORLANDO, FL 32805

Title: D
Name: MONACO, DEAN
Address: 1600 NW CHRISTMAS ROAD
City-St-Zip: CHRISTMAS, FL 32709

Title: D
Name: RILEY, DEREK
Address: 4213 OLD TRAFFORD WAY
City-St-Zip: ORLANDO, FL 32810

I hereby 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 all other like empowered.

SIGNATURE: DAVID LEE CONSTANTINE

D

01/26/2011

Electronic Signature of Signing Officer or Director

Date