

FILE NOW: FILING FEE IS \$61.25

FILED  
May 21 1998 8:00am  
Secretary of State

NONPROFIT  
CORPORATION,  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N94000005623 (3)

1. Corporation Name

PROJECT CHALLENGE OF THE WEST COAST, INCORPORATE  
D



Principal Place of Business

Mailing Address

1751 DR MARTIN LUTHER KING JR WAY  
SARASOTA FL 34234  
US

P.O. BOX 1132  
SARASOTA FL 34230  
US

3. Date Incorporated or Qualified

01/01/1995

4. FEI Number

65-0635451 650535451

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐

Yes

☒

No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐

Yes

☒

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HODGES, PAULINE  
912 LACOSTA CIR  
APT. 1  
SARASOTA FL 34236

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

1.1 TITLE

☐ Change

☒ Addition

NAME HODGES, PAULINE  
STREET ADDRESS 912 LACOSTA CIR, APT. 1  
CITY-ST-ZIP SARASOTA FL

1.2 NAME Tom Webber  
1.3 STREET ADDRESS 4933 Rutland Gate  
1.4 CITY-ST-ZIP Sarasota, FL 34234

TITLE ☐ DELETE

2.1 TITLE

☒ Change

☐ Addition

NAME LAW, VALERIE  
STREET ADDRESS 924 LACOSTA CIR  
CITY-ST-ZIP SARASOTA FL

2.2 NAME Valarie Law  
2.3 STREET ADDRESS 1067 North Jefferson  
2.4 CITY-ST-ZIP Sarasota, FL 34236

TITLE ☐ DELETE

3.1 TITLE

☐ Change

☒ Addition

NAME HOLLIMAN, EDNA  
STREET ADDRESS 3021 LOCKWOOD LAKE CIRCLE  
CITY-ST-ZIP SARASOTA FL

3.2 NAME Gretta Sancho  
3.3 STREET ADDRESS 403 N. Washington Blvd  
3.4 CITY-ST-ZIP Sarasota, FL 34236

TITLE ☐ DELETE

4.1 TITLE

☐ Change

☒ Addition

NAME PERKINS, STAN  
STREET ADDRESS 1494 DR MARTIN LUTHER KING JR WAY  
CITY-ST-ZIP SARASOTA FL

4.2 NAME Carolyn McKinnon  
4.3 STREET ADDRESS 1208 North Conrad  
4.4 CITY-ST-ZIP Sarasota, FL 34237

TITLE ☐ DELETE

5.1 TITLE

☒ Change

☐ Addition

NAME HENDON, MARVIN  
STREET ADDRESS 240 N WASHINGTON BLVD  
CITY-ST-ZIP SARASOTA FL

5.2 NAME Dr. Marvin Hendon  
5.3 STREET ADDRESS 403 N. Washington Blvd.  
5.4 CITY-ST-ZIP Sarasota, FL 34236

TITLE ☐ DELETE

6.1 TITLE

☐ Change

☒ Addition

NAME DANIELS, FLORINE  
STREET ADDRESS 310 N BRINK AVE  
CITY-ST-ZIP SARASOTA FL

6.2 NAME Robert Jacobs  
6.3 STREET ADDRESS 5560 Bee Ridge Road  
6.4 CITY-ST-ZIP Sarasota, FL 34237

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Pauline Hodges / Pauline Hodges

11/20/98 (am) 355 m33

CR2E037 (1097)

# Additions

Title: D

Name: Vickie Brodie

Address: 1817 Ivanhoe St.  
Sarasota, FL 34231

ID  
FEI # incorrect on form -  
Correct # is listed below  
Thank you  
Pauline Hodges

Return this part with any correspondence  
so we may identify your account. Please  
correct any errors in your name or address.

CP 575 I

0716801046

YOUR TELEPHONE NUMBER BEST TIME TO CALL  
( ) -

DATE OF THIS NOTICE: 12-02-94  
EMPLOYER IDENTIFICATION NUMBER: 63-0535451  
FORM: SS-4 (TELE-TIN)

INTERNAL REVENUE SERVICE  
ATLANTA GA 39901

PROJECT CHALLENGE OF THE WEST COAST  
INC  
% PAULINE HODGES  
2075 MAIN ST STE 5  
SARASOTA FL 34237