

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000005623

1. Entity Name

PROJECT CHALLENGE OF THE WEST COAST, INCORPORATE

FILED
May 01, 2001 8:00 am
Secretary of State

05-01-2001 90065 008 ****70.00

0075224

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

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0535451

Applied For

Not Applicable

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

Name

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

City

FL

Zip Code

HODGES, PAULINE
4311 BECKHAM PL
SARASOTA FL 34235

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 ☐ Delete
NAME D
STREET ADDRESS HODGES, PAULINE
CITY-ST-ZIP 4311 BEEKMAN
SARASOTA FL 34235

TITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS McKinnon, Carolyn
CITY-ST-ZIP 1524 24th Street
Sarasota, FL 34234

TITLE ☐ Delete
NAME D
STREET ADDRESS WEBBER, TOM
CITY-ST-ZIP 4933 RUTLAND GATE
SARASOTA FL 34234

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME D
STREET ADDRESS SANCHO, GRETTO
CITY-ST-ZIP 1815 -2ND AVE E
BRADENTON FL 34208

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME D
STREET ADDRESS PERKINS, STAN
CITY-ST-ZIP 1751 DR. MLK JR. WAY
SARASOTA FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME D
STREET ADDRESS HENDON, DR MARVIN
CITY-ST-ZIP 10519 CHEVAL PL
BRADENTON FL 34202

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Pauline Hodges
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Executive Director

Date

Daytime Phone #

4/23/01 (941) 355-0733

CR2E037 (10/00)