

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N94000005623

FILED
Sep 13, 2002
Secretary of State

Entity Name: PROJECT CHALLENGE OF THE WEST COAST, INCORPORATED

Current Principal Place of Business:

1751 DR MARTIN LUTHER KING JR WAY
SARASOTA, FL 34234 US

New Principal Place of Business:

1844 17TH STREET
104-C
SARASOTA, FL 34234 US

Current Mailing Address:

P.O. BOX 1132
SARASOTA, FL 34230 US

New Mailing Address:

FEI Number: 65-0535451 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HODGES, PAULINE
4311 BECKHAM PL
SARASOTA, FL 34235

Name and Address of New Registered Agent:

HODGES, PAULINE
1159 FOUR SEASONS CIRCLE
APT. #201
SARASOTA, FL 34234

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: PAULINE HODGES

09/13/2002

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HODGES, PAULINE
Address: 4311 BEEKMAN
City-St-Zip: SARASOTA, FL 34235

Title: D () Delete
Name: WEBBER, TOM
Address: 4933 RUTLAND GATE
City-St-Zip: SARASOTA, FL 34234

Title: D () Delete
Name: SANCHO, GRETTO
Address: 1815 -2ND AVE E
City-St-Zip: BRADENTON, FL 34208

Title: D () Delete
Name: PERKINS, STAN
Address: 1751 DR. MLK JR. WAY
City-St-Zip: SARASOTA, FL

Title: D () Delete
Name: HENDON, DR MARVIN
Address: 10519 CHEVAL PL
City-St-Zip: BRADENTON, FL 34202

Title: V () Delete
Name: DANIELS, FLORINE
Address: 310 N BRINK AVE
City-St-Zip: SARASOTA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HODGES, PAULINE
Address: 1159 FOUR SEASONS CIRCLE APT #201
City-St-Zip: SARASOTA, FL 34234

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MCKINNON, CAROLYN
Address: 403 N. WASHINGTON BLVD
City-St-Zip: SARASOTA, FL 34236

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: HENDON, DR MARVIN
Address: 10519 CHEVAL PL
City-St-Zip: BRADENTON,, FL 34202

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: FLORINE DANIELS

V

09/13/2002

Electronic Signature of Signing Officer or Director

Date