

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001133

FILED  
Jan 16, 2006  
Secretary of State

**Entity Name:** TEEN CHALLENGE INTERNATIONAL, INC.

**Current Principal Place of Business:**

3706 S SANFORD AVE  
PO BOX 607737  
ORLANDO, FL 328607737

**New Principal Place of Business:**

**Current Mailing Address:**

TEEN CHALLENGE INT'L.  
PO BOX 890  
LOCUST GROVE, VA 22508

**New Mailing Address:**

**FEI Number:** 59-3302759

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

NANCE, JERRY  
141 WYMORE RD.  
MAITLAND, FL 32751 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: PD ( ) Delete  
Name: WILKERSON, DON  
Address: PO BOX 745  
City-St-Zip: LOCUST GROVE, VA 22508

Title: VPD ( ) Delete  
Name: MARTINS, JOAO  
Address: MONTE DE LIVRIMENTO APARADO 26  
City-St-Zip: LOURES, PO

Title: T ( ) Delete  
Name: GLOVER, GEORGE  
Address: PO BOX 777  
City-St-Zip: LONDON, ONTARIO, CN N6P-16

Title: S ( ) Delete  
Name: GRIFFITH, DENNIS  
Address: 5445 CHICAGO AVE.  
City-St-Zip: RIVERSIDE, CA 92507

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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 Chapter 119, 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: DON WILKERSON

PD

01/16/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date