

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N95000002524

FILED
Jan 08, 2003
Secretary of State

Entity Name: HARC CHALLENGE FOUNDATION, INC.

Current Principal Place of Business:

220 E MADISON ST
SUITE 1040
TAMPA, FL 33602 US

New Principal Place of Business:

Current Mailing Address:

P.O BOX 9537
TAMPA, FL 33674 US

New Mailing Address:

FEI Number: 59-3357217

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LILLISTON, RICHARD
2714 W KIRBY ST
TAMPA, FL 33674 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: CT () Delete
Name: HOLCOMB, JOHN
Address: 101 E. KENNEDY BLVD. #3700
City-St-Zip: TAMPA, FL 33602

Title: T () Delete
Name: BRANNOCK, STEVEN
Address: 8113 REVELS RD.
City-St-Zip: RIVERVIEW, FL 33569

Title: T () Delete
Name: PINZEL, BONNIE J
Address: 4615 N. PARK AVE. #409
City-St-Zip: CHEVY CHASE, MD 20815

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: ALVAREZ, MANNY
Address: 4144 ARMENIA AVENUE
City-St-Zip: TAMPA, FL 33603

Title: T () Change (X) Addition
Name: VIVERO, JOSE
Address: P.O. BOX 17704
City-St-Zip: TAMPA, FL 33682 77

Title: T () Change (X) Addition
Name: MARKMAN, STUART
Address: 100 ASHLEY DRIVE SOUTH
City-St-Zip: TAMPA, FL 33602

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: JOHN HOLCOMB

CT

01/08/2003

Electronic Signature of Signing Officer or Director

Date