

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007587

FILED
Apr 24, 2004
Secretary of State**Entity Name:** WAKE UP CALL, INC.**Current Principal Place of Business:**OVERCOMERS COUNSELING CENTER
10130 CAUSEWAY BLVD.
TAMPA, FL 33619**New Principal Place of Business:****Current Mailing Address:**OVERCOMERS COUNSELING CENTER
10130 CAUSEWAY BLVD.
TAMPA, FL 33619**New Mailing Address:****FEI Number:** 59-3617077**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**COSBY, DANNY L
6919 GRAY OAK PLACE
RIVERVIEW, FL 33569 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: COSBY, DANNY L
Address: 6919 GRAY OAK
City-St-Zip: RIVERVIEW, FL 33569

Title: VD () Delete
Name: COSBY, SHARRON K
Address: 6919 GRAY OAK PLACE
City-St-Zip: RIVERVIEW, FL 33569

Title: D () Delete
Name: GOSS, JOHN R
Address: 10130 CAUSEWAY BOULEVARD
City-St-Zip: TAMPA, FL 33619

Title: D () Delete
Name: SPEICHER, DAVID
Address: 10130 CAUSEWAY BOULEVARD
City-St-Zip: TAMPA, FL 33619

Title: D (X) Delete
Name: SCHAFER, ROBERT
Address: 10130 CAUSEWAY BOULEVARD
City-St-Zip: TAMPA, FL 33619

Title: D (X) Delete
Name: STEEGE, DAVID
Address: 9510 WOODLAND RIDGE DRIVE
City-St-Zip: TEMPLE TERRACE, FL 33637

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: GRIFFIN, EILEEN
Address: 1430 OAKFIELD DRIVE
City-St-Zip: BRANDON, FL 33511

Title: D (X) Change () Addition
Name: BERTRAN, ROBIN
Address: GORNTON ROAD
City-St-Zip: BRANDON, FL 33510

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 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: DANNY L COSBY

PD

04/24/2004

Electronic Signature of Signing Officer or Director

Date