2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000007587

Entity Name: WAKE UP CALL, INC.

FILED Aug 30, 2003 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
6919 GRAY OAK PLACE RIVERVIEW, FL 33569				OVERCOMERS COUNSELING CENTER 10130 CAUSEWAY BLVD. TAMPA, FL 33619			
Current Mailing Address:				New Mailing Address:			
6919 GRAY OAK PLACE RIVERVIEW, FL 33569				OVERCOMERS COUNSELING CENTER 10130 CAUSEWAY BLVD. TAMPA, FL 33619			
FEI Number:	59-3617077	FEI Number Applied For ()	FEI Numb	er Not Applic	able ()	Certificate of Statu	us Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							Agent:
COSBY, DANNY L 6919 GRAY OAK PLACE RIVERVIEW, FL 33569 US 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:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD ()E COSBY, DANNY 6919 GRAY OAK RIVERVIEW, FL		Ti N A	itle: lame: ddress: ity-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	VD () E COSBY, SHARRO 6919 GRAY OAK RIVERVIEW, FL	PLACE	N A	itle: ame: ddress: ity-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	D () E COSBY, CARON 6916 GRAY OAK RIVERVIEW, FL	PLACE	N A	ame: ddress:	GOSS, JOHN	EWAY BOULEVARD	1
Title: Name: Address: City-St-Zip:	D () E COSBY, JOSHUA 6919 GRAY OAK RIVERVIEW, FL	PLACE	N A	ame: ddress:	SPEICHER, D	EWAY BOULEVARD	n
Title: Name: Address: City-St-Zip:	()[Delete	N A	itle: ame: ddress: tity-St-Zip:	SCHAFFER, F	EWAY BOULEVARD	1
Title: Name: Address: City-St-Zip:	()[Delete	N A	ame: ddress:	STEEGE, DAY 9510 WOODL) Change (X) Addition /ID .AND RIDGE DRIVE RACE, FL 33637	n

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 D 08/30/2003

ROBIN P. BERTRAN, DIRECTOR 117 GORNTO LAKE ROAD BRANDON, FL 33510

RALPH C. STODDARD, DIRECTOR 1905 CIMMARON RUN DRIVE VALRICO, FL 33569

EILEEN H. GRIFFIN, DIRECTOR 1430 OAKFIELD DRIVE BRANDON, FL 33511

RALPH C. STODDARD 1905 CIMMARON RUN DRIVE

EILEEN H. GRIFFIN, DIRECTOR 1430 OAKFIELD DRIVE BRANDON, FL 33511

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