

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 01, 2006 8:00 am
Secretary of State

03-01-2006 90030 016 ***163.75

DOCUMENT # P05000095923

1. Entity Name

A. CHALLENGER, INC.



Principal Place of Business

9621 BEACH BLVD UNIT 2
PANAMA CITY BEACH FL 32408

Mailing Address

9621 BEACH BLVD UNIT 2
PANAMA CITY BEACH FL 32408

2. Principal Place of Business

201 Chelsea

3. Mailing Address

201 Chelsea

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Panama City Beach FL

City & State

Panama City, Beach Florida

Zip

32413

Country

Bay

Zip

32413

Country

Bay

4. FEI Number

870749864

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CHALLENGER, ANDREW R
9621 BEACH BLVD UNIT 2
PANAMA CITY BEACH FL 32408

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Andrew R Challenger

Andrew R Challenger 2-22-06

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☒ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CEOP
CHALLENGER, ANDREW R
9621 BEACH BLVD UNIT 2
PANAMA CITY BEACH FL 32408 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
CHALLENGER, ANDREW R
9621 BEACH BLVD UNIT 2
PANAMA CITY BEACH FL 32408 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
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CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Andrew R Challenger

2-22-06