2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 05, 2007 8:00 am
Secretary of State
02-05-2007 90094 044 ***163.75

DOCUMENT # P05000095923

1. Entity Name
A. CHALLENGER, INC.

Principal Place of Business	Mailing Address
201 CHELSEA PANAMA CITY BEACH FL 32413	201 CHELSEA PANAMA CITY BEACH FL 32413

1st MOORE CR2E034 (10/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
201 Chelsea Dr	201 Chelsea Dr
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 87-0749964 — 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: Challenger, Andrew R
Street Address (P.O. Box Number is Not Acceptable): 201 Chelsea Dr
City: Panama City Beach FL Zip Code: 32413

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: [signature] Andrew R Challenger 1-30-07
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, 2007 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
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	☐ Change ☐ Addition
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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: [signature] Andrew R Challenger 1-30-07 (850) 596 4864
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #