

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P97000064423**

1. Entity Name

CHALLENGE FINANCIAL INVESTORS CORP.

Principal Place of Business

**1301 SEMINOLE BLVD., SUITE 140
LARGO FL 33770**

Mailing Address

**1301 SEMINOLE BLVD., SUITE 140
LARGO FL 33770**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3460034

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ANDERSON, E. EUGENE
1301 SEMINOLE BLVD., SUITE 140
LARGO FL 33770**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when relocating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO ANDERSON, EUGENE 14377 YACHT CLUB BLVD. SEMINOLE FL 33778 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BARIAN, HAROLD 504 LILLIAN DRIVE MADEIRA BEACH FL 33708 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PALMER, RONALD G 11533 86TH AVE N. SEMINOLE FL 33772 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director/Treasurer Michael Riley 5370 W. 95th St. Prairie Village, KS 66207 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED**Michael Riley**

Date

913-383-9248

Daytime Phone

A U U U U U U U



DO NOT WRITE IN THIS SPACE

CR2E034 (5/00)



NATIONS HOLDING COMPANY

P97000064423(Attachment)

A0067663

July 14, 2000

5370 W. 95th Street
Prairie Village, Kansas 66207
Phone: (913) 383-0202
Fax: (913) 648-0825

Attention: Corporations Division
Florida Secretary of State
409 East Gaines Street
Tallahassee, FL 32399

Re: Challenge Financial Investors Corp.

Dear Corporations Division,

Enclosed please find our 2000 Annual Report, along with the \$150.00 filing fee. We did not receive the notice that went out before May 1st. Thank you very much for your prompt attention to this matter.

Sincerely,

A handwritten signature in cursive script that reads "Jaime Steckelberg". The signature is written in dark ink and is positioned above the printed name and phone number.

Jaime Steckelberg
800-478-2580 ext. 229