

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K54522

FILED  
Apr 16, 2010  
Secretary of State

**Entity Name:** COLUMBIA TIMBER CO., INC.

**Current Principal Place of Business:**

4424 NW 13TH ST.  
SUITE C-2  
GAINESVILLE, FL 32609

**New Principal Place of Business:**

**Current Mailing Address:**

4424 NW 13TH ST.  
SUITE C-2  
GAINESVILLE, FL 32609

**New Mailing Address:**

**FEI Number:** 59-3038167

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DAVIDSON, ALBERT PRES  
6425 N.W. 54TH WAY  
GAINESVILLE, FL 32653 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DPT  
Name: DAVIDSON, ALBERT PRES  
Address: 6425 NW 54TH WAY  
City-St-Zip: GAINESVILLE, FL 32653

Title: DVS  
Name: MCRAE, NORMAN I  
Address: 534 SW BROOKWOOD DRIVE  
City-St-Zip: LAKE CITY, FL 32024

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ALBERT DAVIDSON

DPT

04/16/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date