

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000485

FILED  
Apr 15, 2005  
Secretary of State

**Entity Name:** COLUMBUS APPEAL CORPORATION

**Current Principal Place of Business:**

7725 S. HIGHWAY A1A  
MELBOURNE BEACH, FL 32951 US

**New Principal Place of Business:**

**Current Mailing Address:**

7725 S. HIGHWAY A1A  
MELBOURNE BEACH, FL 32951 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

SCULTHROP, BRIAN M  
5555 S. HIGHWAY A1A  
MELBOURNE BEACH, FL 32951 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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: SCULTHROP, LEONARD E  
Address: 7725 S. HIGHWAY A1A  
City-St-Zip: MELBOURNE BEACH, FL 32951 US

Title: D ( ) Delete  
Name: SCULTHROP, BRIAN M  
Address: 5555 S. HIGHWAY A1A  
City-St-Zip: MELBOURNE BEACH, FL 32951 US

Title: D ( ) Delete  
Name: BEALS, ROBERT L  
Address: 730 E. STRAWBRIDGE AVE., SUITE 101  
City-St-Zip: MELBOURNE, FL 32901 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: BRIAN M. SCULTHROP

D

04/15/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date