2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # N17525 Secretary of State 08-08-2005 90044 027 ****61.25 THE COLUMBUS CLUB OF ST. AUGUSTINE, INC. Principal Place of Business Mailing Address P. O. BOX 771 P. O. BOX 771 ST. AUGUSTINE FL 32085-0771 ST. AUGUSTINE FL 32085-0771 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 2nd MOORE CR2E037 (5/05) City & State City & State 4. FEI Number Applied For 59-2829290 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Nama PELLICER, CHARLES E Street Address (P.O. Box Number is Not Acceptable) 28 CORDOVA STREET ST-AUGUSTINE FL Zip Code FI 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, typed or printed name of registered agent and title if applicable DATE (NOTE Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By September 7, 2005 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. PRESIDENT DUFRESNE, BRUCE TITLE TITLE Delete Change ☐ Addition JOHNGIllESPIE 218 SEA TURTLE WAY 14 SEMINOLE DR NAME NAME STREET ADDRESS SAINT AUGUSTINE FL 32084 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP AUGUSTING FL 32084 SECRETARY CHARLES W, STOVER TITLE KUZNIK, TONY **⊠** Defete -etiange ☐ Addition NAME 504 SUGAR PINE COURT NAME GOG COQUINA BLUD ST AUGUSTINE FL 32080 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST AUGUSTING PL 32680 TREASURER TITLE EVRARD, JAMES A ☐ Detete TITLE ☐ Change Addition NAME 1132 COMPASS ROAD NAME (No Change) STREET ADDRESS ST AUGUSTINE FL 32080 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP GOMEZ, FRANK DIRECTOR BRUCE DU FRESTE TIFLE **⊠** Delete ☐ Change ☐ Addition 704 MICKLER BLVD NAME NAME 14 Seminoie Dr ST. AUGUSTINE FL 32084 STREET ADDRESS STREET ADDRESS ı, STAVGOSTINE FL 32084 CITY-ST-ZIP CITY-ST-ZIP DIRECTOR KUZNIK, TONY TITLE ☐ Change Delete TITLE Addition 504 SUGAR PINE COURT NAME NAME 1105 BAy Porest DR ST AUGUSTINE FL 32080 STREET ADDRESS STREET ADDRESS FL 32084 CITY-ST-ZIP CITY-ST-7IP ST AUGUSTING LOVELESS, ROLAND DIRECTOR TITLE Delete TITLE 25 ALCIRA COURT NAME NAME (No Change) ST. AUGUSTINE FL STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP

FILED

Aug 08, 2005 8:00 am

12. 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 617, 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:

Jame a Tunal JAMES A. EVRARD Preasura 8.2-05 904 471 2262