## 2005 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # 212272 1. Entity Name THE COLONNADE INCORPORATED Principal Place of Business 3401 BAYSHORE BLVD TAMPA, FL 33629 DO NOT WRITE IN THIS SPACE 4 5

FILED Feb 07, 2005 08:00 AM Secretary of State

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DO NOT WRITE IN THIS SPACE				02012005	02012005 No Chg-P CR2E034 (10/03)				
				4. FEI Number 59-0835199				Applied For Not Applicable	
				5. Certificate	of Status Desired		<b>\$8.75</b> Fee Requ	Additional ired	
6. Name and Address of Current Registered Agent									
WHITESIDE, JACK F, JR 3401 BAYSHORE BLVD. TAMPA, FL 33629			DO NOT WRITE IN THIS SPACE						
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 titls	d Agent signature rec	quired when reinstating)	Henon	77 1 <sup>04 16</sup> 17 1	1			
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Finan     Trust Fund Contribution.		<b>\$5.00</b> May Be Added to Fees	02/07/05	-80059	-005	150.00	
10.	OFFICERS AND DIREC	CTORS _	Ι						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD WHITESIDE, RICHARD D,III 4914 S MELROSE TAMPA, FL								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WHITESIDE, JACK F, JR 520 SEA GULL WAY ANNA MARIA, FL								
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	RITE	<b>-</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN 7	THIS SP	ACE		,	
TITLE NAME STREET ADDRESS City-St-2ip									
TITLE NAME STREET ADDRESS									

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 of trustee emportered to execute this report as regulated by Chapter 507, 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.

Jack / Whitesdae . OWNER

Jack SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

02.0405

<u>813-839-7558</u>

Daytime Phone #