

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 703345

1. Entity Name

COLUMBIA CORPORATION OF ST. PETERSBURG, INC.

FILED
Mar 28, 2000 8:00 am
Secretary of State

03-28-2000 90092 017 ****65.00

Principal Place of Business

5800 15 AVE S.
GULF PORT FL 33707

Mailing Address

P.O. BOX 12866
ST. PETERSBURG FL 33733-2866

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-6176801

Applied For

Not Applicable

Zip

Country

Zip

Country

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

MIAMI, LEON L.
2340-64TH ST. N.
ST. PETERSBURG FL 33710

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 reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
22222
PAPE, ANTHONY
1695-56TH STREET N
ST. PETERSBURG FL 33710 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
p
Leon L. Miami
2340-64th street no.
ST. PETERSBURG, FL. 33310 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
THOMPSON, JOSEPH
3028-54TH STREET S
GULFPORT FL 33707 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
Anthony pape
1695-56th Street no.
St. Petersburg, FL 33710 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
HUTCHINSON, SHELDON
4051 60TH WAY N
ST. PETERSBURG FL 33709 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MILLER, SR. D
3128 59TH STREET S
GULFPORT FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MIAMI, LEON L.
2340 64TH STREET N
ST. PETERSBURG FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
SMITH, JOSEPH K.
2946 - 60TH STREET, N.
ST. PETERSBURG FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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: **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)