

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 07 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 714337 (3)

1. Corporation Name

COLUMBIAN ASSOCIATION OF BRADENTON, INC.



Principal Place of Business

Mailing Address

2203 30TH AVENUE WEST
BOX 1804
BRADENTON FL 34206

2203 30TH AVENUE WEST
BOX 1804
BRADENTON FL 34206-1804

3. Date Incorporated or Qualified
03/28/1968

3a. Date of Last Report
02/16/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number
59-2189673

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ZIEGLER, CHARLES N.
6101 34TH STREET WEST
APT. 320
BRADENTON FL 34210

81 Name
GISCHEL, WALTER E
82 Street Address (P.O. Box Number is Not Acceptable)
4609 CORAL BLVD.
83
84 City
BRADENTON FL 85 Zip Code
34210

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: WALTER E. GISCHEL * Walter E. Gischel 1/28/97
(NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	<input type="checkbox"/> DELETE
NAME	SANDS, LARRY	
STREET ADDRESS	3705 QUAIL HOLLOW PLACE	
CITY-ST-ZIP	BRADENTON FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	FLEMING, T HOMAS P	
STREET ADDRESS	2306 45TH CT W	
CITY-ST-ZIP	BRADENTON FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	KENNY, SIDNEY G	
STREET ADDRESS	624 US 301 BLVD E C-12	
CITY-ST-ZIP	BRADENTON FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	ZIEGLER, CHARLES N.	
STREET ADDRESS	6101 34TH STREET WEST APT. 320	
CITY-ST-ZIP	BRADENTON FL	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	SCHLEMMER, DAVID B.	
STREET ADDRESS	2414 55T AVENUE E	
CITY-ST-ZIP	BRADENTON FL	
TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	VAN HOUTEN, JOHNA	
STREET ADDRESS	6416 26TH STREET WEST	
CITY-ST-ZIP	BRADENTON FL	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	D.P GISCHEL, WALTER E.
4.3 STREET ADDRESS	4609 CORAL BLVD.
4.4 CITY-ST-ZIP	BRADENTON, FL. 34210
5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	D.V VAN HOUTEN, KENNETH T.
5.3 STREET ADDRESS	7704 9TH AV. DR. N.W.
5.4 CITY-ST-ZIP	BRADENTON, FL. 34209
6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	D.S ANDRIESSE, DANIEL F.
6.3 STREET ADDRESS	2200 38TH AV. W. 14R-202
6.4 CITY-ST-ZIP	BRADENTON, FL. 34205

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Thomas P. Fleming 1/28/97 798-9079
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/96)