

2001 UNIFORM BUSINESS REPORT (UBR)

17.
Re **FILED**
Feb 15, 2001 8:00 am
Secretary of State
01-26-2001 90149 038 ****61.25

DOCUMENT # 714337

1. Entity Name

COLUMBIAN ASSOCIATION OF BRADENTON, INC.

Principal Place of Business

2203 30TH AVENUE WEST
BOX 1604
BRADENTON FL 34206

Mailing Address

2203 30TH AVENUE WEST
BOX 1604
BRADENTON FL 34206

2. Principal Place of Business

SAME

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SAME

City & State

SAME

Zip

Country

SAME MANAGER

Zip

Country

SAME MANAGER

4. FEI Number

59-2189673

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

~~GISCHEL, WALTER E
4609 CORAL BLVD
APT. 329
BRADENTON FL 34210~~

7. Name and Address of New Registered Agent

Name

PAUL SKELLY

Street Address (P.O. Box Number is Not Acceptable)

4531 CORAL LAKE DR.

City

BRADENTON

FL

Zip Code

34210

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

Paul Skelly **Paul Skelly, PRESIDENT**

1-15-01

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

TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	ROY, NORMAND	
STREET ADDRESS	2514 55TH AVENUE WEST	
CITY-ST-ZIP	BRADENTON FL 34207	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SKELLY, THOMAS	
STREET ADDRESS	4531 CORAL LAKE DRIVE	
CITY-ST-ZIP	BRADENTON FL 34210	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	MARINO, LEO	
STREET ADDRESS	7036 13TH STREET EAST	
CITY-ST-ZIP	SARASOTA FL 34243	
TITLE	DP	<input checked="" type="checkbox"/> Delete
NAME	GISCHEL, WALTER E	
STREET ADDRESS	4609 CORAL BLVD	
CITY-ST-ZIP	BRADENTON FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MURPHY, JAMES	
STREET ADDRESS	1409 57 STREET WEST	
CITY-ST-ZIP	BRADENTON FL 34209	
TITLE	DS	<input checked="" type="checkbox"/> Delete
NAME	O'NEILL, ROBT F.	
STREET ADDRESS	6070 ARLENE WAY	
CITY-ST-ZIP	BRADENTON FL 34207	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PRES.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PAUL SKELLY	
STREET ADDRESS	4531 CORAL LAKE DR.	
CITY-ST-ZIP	BRADENTON, FL 34210	
TITLE	V. PRES.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEO MARINO III	
STREET ADDRESS	3701 17 TH AVE. W.	
CITY-ST-ZIP	BRADENTON, FL 34205	
TITLE	TREASURER	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VIC VACCORA	
STREET ADDRESS	5652 COUNTRY LAKES DR.	
CITY-ST-ZIP	SARASOTA, FL 34243	
TITLE	RECORDING SECRETARY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KEN TERRYBERRY	
STREET ADDRESS	4812 CORAL BLVD.	
CITY-ST-ZIP	BRADENTON, FL 34210	
TITLE	GRAND KNIGHT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ERON COATES	
STREET ADDRESS	1907 12 TH ST. W.	
CITY-ST-ZIP	BRADENTON, FL 34205	
TITLE	DEPUTY GRAND KNIGHT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHARLES GARDNER	
STREET ADDRESS	204 10 TH ST. E.	
CITY-ST-ZIP	BRADENTON, FL 34208	

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:

Paul Skelly **REQUIRES SKELLY, PRESIDENT 1-15-01 (941) 246-1082**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)