

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716117

FILED  
May 23, 2006  
Secretary of State

Entity Name: COLUMBUS SOCIAL CLUB, INC.

**Current Principal Place of Business:**

1509 HENDRICKS AVE.  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

**Current Mailing Address:**

1509 HENDRICKS AVE.  
JACKSONVILLE, FL 32207

**New Mailing Address:**

FEI Number: 59-0809831      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

ASHLEY, KIM R  
3482 DOCKSINER DR., N  
JACKSONVILLE, FL 32257      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: CLOUGH, DAVID  
Address: 3366 SHAUNA OAKS DR.  
City-St-Zip: JACKSONVILLE, FL 32277

Title: D      ( ) Delete  
Name: LOSCO, JOHN F  
Address: 2470 PROVOST CT.  
City-St-Zip: JACKSONVILLE, FL

Title: P      ( ) Delete  
Name: RUZANKA, MICHAEL  
Address: 1439 CAMPBELL AVE  
City-St-Zip: JACKSONVILLE, FL 32209

Title: T      ( ) Delete  
Name: ASHLEY, KIM R  
Address: 3482 DOCKSIDER DR.N.  
City-St-Zip: JACKSONVILLE, FL

Title: S      ( ) Delete  
Name: ASHLEY, GARTH,  
Address: 3939 CONGA ST  
City-St-Zip: JACKSONVILLE, FL

Title: VP      ( ) Delete  
Name: SLOWIK, MICHAEL  
Address: 3749 SPENCE CT  
City-St-Zip: JACKSONVILLE, FL 32207

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VP      (X) Change ( ) Addition  
Name: CLOUGH, DAVID  
Address: 3366 SHAUNA OAKS DR.  
City-St-Zip: JACKSONVILLE, FL 32277

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D      (X) Change ( ) Addition  
Name: RUZANKA, MICHAEL  
Address: 1439 CAMPBELL AVE  
City-St-Zip: JACKSONVILLE, FL 32209

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P      (X) Change ( ) Addition  
Name: SLOWIK, MICHAEL  
Address: 3749 SPENCE CT  
City-St-Zip: JACKSONVILLE, FL 32207

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KIM R ASHLEY

T

05/23/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date