FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT **1999**

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Aug 02, 1999 8:00 am
Secretary of State
08-02-1999 90012 003 ****61.25

0018702

DOCUMENT # 716234

1. Corporation Name
COLUMBIAN CLUB OF SOUTH ORLANDO, INC.

Principal Place of Business	Mailing Address
6200 S. ORANGE BLOSSOM TR. P.O.BOX 590544 ORLANDO FL 32859-0544	6200 S. ORANGE BLOSSOM TR. P.O.BOX 590544 ORLANDO FL 32859-0544

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualifed 03/19/1969
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 23-7137313 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required
Zip / Country 24 / 25	Zip / Country 29 / 30	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

STEPHENS, JOHN C
~~5303 HANGEL AVE A20~~
~~ORLANDO FL 32809~~

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
5335 WHITE CLIFF LN APT 2

83

84 City ORLANDO FL 85 Zip Code 32812

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☒ DELETE	1.1 TITLE	PD	☐ Change ☒ Addition
NAME	SQUIRES, EDWARD P		1.2 NAME	COLLINS, RICHARD E	
STREET ADDRESS	3481 MORNINGSIDE DR		1.3 STREET ADDRESS	2814 HEARTHSTONE WAY	
CITY-ST-ZIP	KISSIMMEE FL		1.4 CITY-ST-ZIP	ORLANDO FL 32839	
TITLE	VPD	☒ DELETE	2.1 TITLE	VPD	☐ Change ☒ Addition
NAME	FORZA, DENNIS		2.2 NAME	VINCENT, ROGER P	
STREET ADDRESS	5309 STRATFIELD DR		2.3 STREET ADDRESS	4308 BRANDEIS AVE	
CITY-ST-ZIP	ORLANDO FL		2.4 CITY-ST-ZIP	~~ORLANDO FL 32839~~	
TITLE	TD	☒ DELETE	3.1 TITLE	TD	☐ Change ☒ Addition
NAME	RINEY, JAMES W		3.2 NAME	CONIGLIO, FRANK C JR	
STREET ADDRESS	6636 CITRUS VALLEY DR		3.3 STREET ADDRESS	3991 CARRADALE CT	
CITY-ST-ZIP	ORLANDO FL		3.4 CITY-ST-ZIP	ORLANDO FL 32809	
TITLE	SD	☒ DELETE	4.1 TITLE	SD	☐ Change ☒ Addition
NAME	SPONDER, PHILLIP A		4.2 NAME	ANSAG, ROBERTO C	
STREET ADDRESS	5106 LACROIX AVE		4.3 STREET ADDRESS	3725 QUANDO CIR	
CITY-ST-ZIP	ORLANDO FL		4.4 CITY-ST-ZIP	ORLANDO FL 32812	
TITLE	D	☒ DELETE	5.1 TITLE	D	☐ Change ☒ Addition
NAME	BURR, CHARLES		5.2 NAME	CLOUTIER, MAURICE A	
STREET ADDRESS	702 GALSWORTHY AVE		5.3 STREET ADDRESS	314 KRUEGER ST	
CITY-ST-ZIP	ORLANDO FL		5.4 CITY-ST-ZIP	ORLANDO FL 32839	
TITLE	D	☒ DELETE	6.1 TITLE	D	☐ Change ☒ Addition
NAME	DARINO, ROBERT		6.2 NAME	SCOTT, JAMES W	
STREET ADDRESS	936 ALMOND TREE CIRCLE		6.3 STREET ADDRESS	7032 BARBY LN	
CITY-ST-ZIP	ORLANDO FL		6.4 CITY-ST-ZIP	ORLANDO FL 32812	

CR2E037 (11/98)

14. 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 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, with all other like empowered.

SIGNATURE: Richard A Collins **REQUIRED** 7/26/99 (407)859-8209
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

716234
599664-90012-3

13. CONTD ADDITIONS TO OFFICERS AND DIRECTORS

D X ADDITION
BELIVEAU, DONALD J
402 DOOLITTLE ST
ORLANDO FL 32839

D X ADDITION
WESTON, RAYMOND R
820 EVANGELINE AVE
ORLANDO FL 32809

D X ADDITION
SCHWARZ, JOSEPH J
5422 SILENT BROOK DR
ORLANDO FL 32821