2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2001 8:00 am
Secretary of State
02-13-2001 90025 022 ****61.25

DOCUMENT # 716234

1. Entity 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

C0020328

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 23-7137313 ☐ Applied For ☐ Not Applicable

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
SCHLAGTER, ALAN E 1325 GALSWORTH AVE ORLANDO FL 32804	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code 32809

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	PD COLLINS, RICHARD E 2814 HEARTHSTONE WAY ORLANDO FL 32839	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD CLOUTIER, MAURICE A 314 KRUEGER ST ~~ORLANDO FL 32839~~	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD VINCENT, ROGER P 4308 BRANDEIS AVE ORLANDO FL 32839	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD CIESLAK, ALAN B 2774 ORCHID LN ~~KISSIMMEE FL 34744~~	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD CONIGLIO, FRANK C JR 3991 CARRADALE CT ORLANDO FL 32809	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD SCHLAGTER, ALAN E 1325 GALSWORTHY AVE ~~ORLANDO FL 32809~~	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD ANSAG, ROBERTO C 3725 QUANDO CT ORLANDO FL 32812	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD ARENA, DENNIS J 5705 DELANO LN ~~ORLANDO FL 32821~~	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CLOUTIER, MAURICE A 314 KRUEGER ST ORLANDO FL 32839	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D COLLINS, RICHARD E 2814 HEARTHSTONE WAY ~~ORLANDO FL 32839~~	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SCOTT, JAMES W 7032 BARBY LN ORLANDO FL 32812	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VINCENT, ROGER P 4308 BRANDEIS AVE ORLANDO FL 32839 (CONT'D ON ATTACHED SHEET)	☐ Change ☒ Addition

CR2E037 (10/00)

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: ALAN E SCHLAGTER RECEIVED 2-8-01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment
D#716239
C0020328

CONTINUATION OF ITEM 11

11. ADDITIONS TO OFFICERS AND DIRECTORS IN 10

TITLE	D	ADDITION
NAME	PERNO, THOMAS J	
ADDRESS	4748 AINSWORTH DR	
CITY-ST-ZIP	ORLANDO FL 32837	
TITLE	D	ADDITION
NAME	WESTON, RAYMOND R	
ADDRESS	820 EVANGELINE AVE	
CITY-ST-ZIP	ORLANDO FL 32809	
TITLE	D	ADDITION
NAME	SCHWARZ, JOSEPH J	
ADDRESS	5422 SILENT BROOK DR	
CITY-ST-ZIP	ORLANDO FL 32821	