2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#716234

Entity Name: COLUMBIAN CLUB OF SOUTH ORLANDO, INC.

FILED Jan 20, 2004 Secretary of State

Current P	e of Business:	New Prin	New Principal Place of Business:			
6200 S. OF P.O.BOX 5	RANGE BLOS	SOM TR.				
Current M	lailing Addre	ss:	New Mail	New Mailing Address:		
1325 GAL\ ORLANDO	WORTH D, FL 32809					
FEI Number: 23-7137313 FEI Number Applied For () FEI			FEI Number Not App	Number Not Applicable () Certificate of Status Desired ()		
Name and	Address of	Current Registered Agent:	Name and	d Address	of New Registered Agent:	
1325 GALS	ER, ALAN E SWORTH AVI), FL 32804	≣				
The above in the State	named entity e of Florida.	submits this statement for the p	ourpose of changing	its registe	red office or registered agent, or both,	
SIGNATU						
	Electro	nic Signature of Registered Age	ent		Date	
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD (CIESLAK, AL I 2774 ORCHID KISSIMMEE, F	LN	Title: Name: Address: City-St-Zip:	314 KRU	(X) Change () Addition R, MAURICE A EGER D, FL 32839	
Title: Name: Address: City-St-Zip:	VPD (ARENA, DENN 5705 DELAND ORLANDO, FL	LN	Title: Name: Address: City-St-Zip:	VPD MCMANU 5545 FAII ORLANDO	•	
Title: Name: Address: City-St-Zip:	TD (SCHLAGTER, 1325 GALWOI ORLANDO, FL	RTHY AVE	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	SD (PERNO, THON 4748 AINSWO ORLANDO, FL	RTH DR	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D (COLLINS, RIC 2814 HEARTH ORLANDO, FL	STONE WAY	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D (VINCENT, RIG 4308 BRANDE ORLANDO, FL	IS AVE	Title: Name: Address: City-St-Zip:	4308 BRA	(X) Change()Addition ROGER P NDEIS AVE D, FL 32839	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ALAN SCHLAGTER TD 01/20/2004