

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 716302

1. Entity Name

THE COLUMBIAN CORPORATION OF CLEARWATER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 OCT 11 PM 11:24

Principal Place of Business

Mailing Address

512 S LINCOLN AVE
P.O. BOX 4745
CLEARWATER FL 33-7564
US

512 S LINCOLN AVE
P.O. BOX 4745
CLEARWATER FL 33-7564
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-1033544

Applied For
Not Applicable

Zip

Country

Zip

Country

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

MARKHAM, EUGENE J
1466 HUNTER LANE
CLEARWATER FL 33764

Name
Serbo C. Simeoni
Street Address (P.O. Box Number is Not Acceptable)
33920 U.S. 19 North Suite 222
Palm Harbor
City FL Zip Code 34684

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
After September 12, 2001, min. will be \$236.25

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 P
NAME RASEFSKE, KEVAN
STREET ADDRESS 3832 PEBBLE COURT
CITY-ST-ZIP PALM HARBOR FL 34684 ☐ Delete

TITLE VPD
NAME MARCHAND, MARCEL
STREET ADDRESS 13272 88 AVE
CITY-ST-ZIP SEMINOLE FL 33776 ☒ Delete

TITLE TD
NAME BOYLE, BRUCE
STREET ADDRESS 1321 FRIEND AVE
CITY-ST-ZIP CLEARWATER FL 33756 ☐ Delete

TITLE SD
NAME BARALT, MICKAEL
STREET ADDRESS 1835 PINE ST
CITY-ST-ZIP CLEARWATER FL 33764 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE President (D)
NAME Serbo C. Simeoni
STREET ADDRESS 33920 US 19 N., Suite 222
CITY-ST-ZIP Palm Harbor, FL 34684 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 400004650034--0
CITY-ST-ZIP 10/23/01--01049--023
*****61.25 *****61.25 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE Secretary (D)
NAME Kevin J. Burks
STREET ADDRESS 601 North Hercules Ave. #1004
CITY-ST-ZIP Clearwater, Florida 33765 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE REQUIRED

9/24/07 727 773-0128

CR2E037 (5/01)

AD