2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#723834

FILED Jan 04, 2007 Secretary of State

Entity Name: COLUMBIA COUNTY SENIOR SERVICES, INC.

Current Principal Place of Business: New Principal Place of Business:

480 SE CLEMENTS PL PO BOX 1772 LAKE CITY, FL 320568772

Current Mailing Address: New Mailing Address:

480 SE CLEMENTS PL PO BOX 1772 LAKE CITY, FL 320568772

FEI Number: 59-1447549 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BOWLING WARREN, FAYE 630 NW OLD MILL DRIVE LAKE CITY, FL 32055 US GREEN, ROBIN 1176 SE ENGLEWOOD AVENUE LAKE CITY, FL 32025 US

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: ROBIN GREEN 01/04/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition
Name: BOWLING WARREN, FAYE Name: GREEN, ROBIN
Address: 630 NW OLD MILL DRIVE Address: 1176 SE ENGLEWOOD AVENUE

City-St-Zip: LAKE CITY, FL 32055 City-St-Zip: LAKE CITY, FL 32025

Title: VD Title: VD (X) Change () Addition () Delete KUYKENDALL, JOHN Name: DUNCAN, DONNA Name: Address: 229 SW MAIN BLVD Address: P.O. BOX 280 City-St-Zip: LAKE CITY, FL 32025 City-St-Zip: LAKE CITY, FL 32056

 Title:
 SD () Delete
 Title:
 SD (X) Change () Addition

 Name:
 KASAK, JOHN
 Name:
 PEELER, CHARLES

 Address:
 904 SW SR247
 Address:
 2054 SW DAIRY STREET

Address: 904 SW SR247 Address: 2054 SW DAIRY STREE City-St-Zip: LAKE CITY, FL 32025 City-St-Zip: LAKE CITY, FL 32024

Title: D () Delete Title: TD (X) Change () Addition Name: CROWETZ, IRV Name: FAIR, LEANNE

Address: 323 S MARION AVE Address: 181 SW HUNTINGTON GLEN
City-St-Zip: LAKE CITY, FL 32025 City-St-Zip: LAKE CITY, FL 32024

Title: TD () Delete Title: ED (X) Change () Addition

 Name:
 CELESTINE, LEVY
 Name:
 FREEMAN, DEBORAH B

 Address:
 PO BOX 672
 Address:
 P.O. BOX 1772

 Address:
 PO BOX 672
 Address:
 P.O. BOX 1772

 City-St-Zip:
 LAKE CITY, FL 32056
 City-St-Zip:
 LAKE CITY, FL 32056

Title: ED (X) Delete Title: () Change () Addition
Name: FRFFMAN DFRORAH B Name:

 Name:
 FREEMAN, DEBORAH B
 Name:

 Address:
 PO BOX 1772
 Address:

 City-St-Zip:
 LAKE CITY, FL 32056
 City-St-Zip:

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: DEBORAH B FREEMAN ED 01/04/2007

Electronic Signature of Signing Officer or Director

Date