## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## Jul 25, 2005 8:00 am DOCUMENT # 734935 Secrétary of State 1. Entity Name 07-25-2005 90099 012 \*\*\*\*61.25 COLUMBIA CLUB OF OSCEOLA COUNTY, INC. Principal Place of Business Mailing Address 2000 NEPTUNE ROAD KISSIMMEE FL 34744 P.O. BOX 421732 KISSIMMEE FL 34742-1732 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) City & State City & State 4. FEI Number Applied For 59-2198526 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HESS, JEROME F Street Address (P.O. Box Number is Not Acceptable) 1840 WILLINGHAM WAY KISSIMMEE FL 34744 City Zip Code 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. I am familiar with, and accept the obligations registered agent. Gome SIGNATURE typed or printed name of registered agent and title if applicab (NOTE Registered Agent signature required when reinstating) ELLE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Due By May 1, 2005 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE 🗭 Delete TITLE X Addition ☐ Change DELAGARZA, JOSE L Richard M. Gerst NAME NAME 334 DAGAMA CT. STREET ADDRESS STREET ADDRESS 2231 Steffanie Ct. KISSIMMEE FL 34758 CITY-ST-ZIP CITY-ST-ZIP Kissimmer FL 34746 VD THE Delete TITLE ☐ Change ★ Addition Donald A. Brunig ROMANILLOS, PRES. R NAME NAME 2119 WILLOW BRICK RD. 2424 Deb+2 STREET ADDRESS STREET ADDRESS WINDERMERE FL 34786 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete THILE ☐ Change Addition HESS, JEROME F NAME NAME 1840 WILLINGHAM WAY STREET ADDRESS STREET ADDRESS KISSIMMEE FL 34744 CITY-ST-7IP CITY-ST-ZIP III) F ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HILE ☐ Delete Addition TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

FILED

SIGNATURE: Mome 7. Hess Setome F. Hess 7/20/05 407-343 =99661

changed, or on an attachment with an address, with all other like empowered.