NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # 746775

1. Corporation Name

COLUMBIA HOME ASSOCIATION OF CHARLOTTE COUNTY. I

Principal Place of Business

2421 TAMIAMI TRAIL PORT CHARLOTTE FL 33952

2421 TAMIAMI TRAIL PORT CHARLOTTE FL 33952

Mailing Address

Apr 01, 1999 8:00 am Secretary of State

04-01-1999 90098 005 ****61.25

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2. Principal Place of Business 2a. Mailing Address 2b. 04/17/1979 Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number 59-1461439 City & State City & State 5. Certificate of Status Desired Fee Required Zip Country Zip Country 6. Election Campaign Financing Trust Fund Contribution Added to Fees 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent GREENWALD, MARTIN 235 BROADRANCH DRIVE PORT CHARLOTTE FL 33948 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered.	able al
Suite, Apt. #, etc. Suite, Apt. #, etc. 59-1461439 Not Applied For Spylastian Suite State City & State City & State Zip Country Zip Country Zip Country Zip Country Suite, Apt. #, etc. 28 Country Suite, Apt. #, etc. 59-1461439 Suite, Apt. #, etc. Suite, Apt. #, etc. 59-1461439 Suite, Apt. #, etc. Suite, Apt. #, etc. 59-1461439 Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. 59-1461439 Suite, Apt. #, etc. S	able al
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City & State 28 Zip Country Zip Country Zip Country Solution Fee Required 5. Certifcate of Status Desired Fee Required \$5.00 May Be Added to Fees 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GREENWALD, MARTIN 2335 BROADRANCH DRIVE PORT CHARLOTTE FL 33948 84 City FL 85 Zip Code	red
Zip Country Zip Country 6. Election Campaign Financing Trust Fund Contribution Added to Fees 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GREENWALD, MARTIN 2335 BROADRANCH DRIVE PORT CHARLOTTE FL 33948 82 Street Address (P.O. Box Number is Not Acceptable) 83 Zip Code	red
Zip Country	red
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GREENWALD, MARTIN 2335 BROADRANCH DRIVE PORT CHARLOTTE FL 33948 82 Street Address (P.O. Box Number is Not Acceptable) 83	red
GREENWALD, MARTIN 2335 BROADRANCH DRIVE PORT CHARLOTTE FL 33948 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	ed
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2335 BROADRANCH DRIVE PORT CHARLOTTE FL 33948 84 City FL 85 Zip Code 44 Disputable the above pared composition submits this statement for the purpose of changing its registe	red.
2335 BROADRANCH DRIVE PORT CHARLOTTE FL 33948 84 City FL 85 Zip Code 44 Disputable the above pared composition submits this statement for the purpose of changing its registe	red.
PORT CHARLOTTE FL 33948 84 City FL 85 Zip Code 44 Disputable the above pared comporation submits this statement for the purpose of changing its registe	red.
84 City FL 85 Zip Code	red.
FL	red.
14 Duray of the provisions of Sections 617 0502 and 617 1508 Florida Statutes, the above named comporation submits this statement for the purpose of changing its register	red.
The Pulsuant to the provisions of decitors of 1,0002 and 011,1000, 1 londs character, the appropriate department of political and appropriate	
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.	'
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when relinstating) DATE]
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	12
	ddition
NAME CHAMBERS, THOMAS 12 NAME FLANIGAN VAMES	ļ
STOREST ADDRESS 1466 SAINT GEORGE IN 1.3 STREET ADDRESS 9990 PEACE KIVERUE. S. W.	ľ
CITY-ST-ZIP PLINTA GORDA FL 14 CITY-ST-ZIP AR CA-DIA FL 38821	
TYPE 1779 A TYPE ATTENDED A	ddition
CARRETT HOMES	}
STREET ADDRESS 1314 KENSIGTON ST 23 STREET ADDRESS 1463 5 4 INT CREDICTE 2000	1
CITY-ST-ZIP PORT CHARLOTTE FL 2.4 CITY-ST-ZIP PUNTA GORDA, FL	
TITLE TD DELETE 3.1 TITLE T.P. Change A	ddition
NAME BATISTA, JOSE 32 NAME BATISTA, JUSE	Ì
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NAME FLANIGAN, JAMES 4.2 NAME 2335 BROADRANCH DR	
AS STREET ADDRESS	ļ
CITY-ST-ZIP ARCADIA FI 33821 44CITY-ST-ZIP PORT (HAPLOTTE FL 33948	
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14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP