

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 11, 2001 8:00 am**  
**Secretary of State**

01-11-2001 90014 003 \*\*\*\*61.25

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DO NOT WRITE IN THIS SPACE

**DOCUMENT # 765390**  
1. Entity Name  
**COLUMBUS CLUB OF BELLEVIEW, INC.**

Principal Place of Business  
**12226 SE HWY 301  
BELLEVIEW FL 34421  
US**

Mailing Address  
**P O BOX 1628  
BELLEVUE FL 34421  
US**

2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

4. FEI Number **59-2782596** Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**CIAMPI, RON  
12077 SE 89TH TERR  
BELLEVUE FL 34420**

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** 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.

SIGNATURE Ron Ciampi Ron Ciampi 1-4-01  
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**

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P CIAMPI, RON 12077 SE 89TH TERR BELLEVUE FL 34420</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T MAHON, JAMES V 15143 SW 38 CIRCLE OCALA FL 34473</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP BRIGADA, CARL 344 MARION OAKS GOLF WAY OCALA FL 34473</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S SCHUBRING, ALBERT 5820 SE 119 PLACE BELLEVUE FL 34420</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D GLASCOCK, HOBERT 14566 SW 34TH TERRACE RD OCALA FL 34473</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD CAMPI, RON 12077 SE 89 TERRACE BELLEVUE FL 34420</b>	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P CIAMPI, RON 12077 SE 89th TERR BELLEVUE, FL. 34420</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP LAFLAMME, DONALD 60 BANYAN OCALA, FL. 34472</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D CIZEWSKI, FRANK 17562 SE 106th AVE. SUMMERFIELD FL. 34491</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D SCHUBRING, ALBERT 5820 SE 119th PL BELLEVUE, FL. 34420</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D SULLIVAN, JOHN 2870 SE 159 LANE RD. SUMMERFIELD, FL. 34491</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D MAHON, JAMES 15143 SW 38 circle OCALA, FL. 34473</b>	<input type="checkbox"/> Change <input type="checkbox"/> 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: FRANCIS C. CIZEWSKI 1-4-2001 248-8500  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)