



2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 13, 2006 8:00 am
Secretary of State

07-13-2006 90020 031 ***158.75

DOCUMENT # 831277 1. Entity Name COLUMBIA RESEARCH CORPORATION					
Principal Place of Business 1201 M STREET SE SUITE 010 WASHINGTON, DC 20003-3703 US			Mailing Address 1201 M STREET SE SUITE 010 WASHINGTON, DC 20003-3703 US		
2. Principal Place of Business SAGE AS ABOVE		3. Mailing Address 11211 WAPLES HILL ROAD SUITE 310		50022370 	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 		05152006 Chg-P CR2E034 (11/05)	
City & State 		City & State FAIRFAX, VA		4. FEI Number 52-0881802	
Zip 		Zip 22030-7406		Country FAIRFAX	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent THOMAS, ODUM W 3209 MAGNOLIA ISLAND BLVD PANAMA CITY, FL 32408			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;"> FL Zip Code </div>		
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 of registered agent. SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE VS NAME MATSKO, MARY ANN STREET ADDRESS 622 SHORE DRIVE CITY-ST-ZIP TRACYS LANDING, MD 20779	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP MARTIN BRASE D 11211 WAPLES HILL ROAD #310 FAIRFAX, VA 22030-7406	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP D ODUM, THOMAS W 3209 MAGNOLIA ISLAND BLVD PANAMA CITY BEACH, FL 32408	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP V PARKER, PATRICIA 5940 CRAFT RD ALEXANDRIA, VA	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP PTD WITBECK, NORMAN C 1801 CRYSTAL DR #808 ARLINGTON, VA	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP D GRAY, ALFRED M 6317 CHAUCER VIEW CIR ALEXANDRIA, VA	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP D BERG, JOHN R 3202 N. TACOMA STREET ARLINGTON, VA	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, 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: <u><i>John R Berg</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <u>5-15-2006</u> Daytime Phone # <u>703 3850966</u>		