

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 836512

1. Entity Name

COLUMBIA COLLEGE (CORPORATION)

FILED
Mar 07, 2000 8:00 am
Secretary of State

03-07-2000 90048 047 ****70.00

| | |
|---|--|
| Principal Place of Business 1001 ROGERS COLUMBIA MO 65216 | Mailing Address 1001 ROGERS COLUMBIA MO 65216-0001 |
|---|--|



DO NOT WRITE IN THIS SPACE

| | | | |
|--------------------------------|---------|---------------------|---------|
| 2. Principal Place of Business | | 3. Mailing Address | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |

| | |
|--|--|
| 4. FEI Number 43-0655867 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

REED, JOSEPH O. J
ORLANDO EXECUTIVE CENTER
2600 TECHNOLOGY DR., SUITE 100
ORLANDO FL 32804

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

| | | |
|--|---|--|
| FILE NOW: FEES IS \$61.25 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | Make Check Payable to Department of State |
|--|---|--|

10. OFFICERS AND DIRECTORS

| | | |
|----------------|-------------------------------|--|
| TITLE | SD | <input type="checkbox"/> Delete |
| NAME | GROSSNICKLE, DAISY | |
| STREET ADDRESS | 3639 AUGUSTA | |
| CITY-ST-ZIP | COLUMBIA MO | |
| TITLE | P | <input type="checkbox"/> Delete |
| NAME | BROUDER, GERALD T. | |
| STREET ADDRESS | COLUMBIA COLLEGE, 1001 ROGERS | |
| CITY-ST-ZIP | COLUMBIA MO | |
| TITLE | CD | <input checked="" type="checkbox"/> Delete |
| NAME | ATKINS, THOMAS | |
| STREET ADDRESS | P.O. BOX 756 N/A | |
| CITY-ST-ZIP | COLUMBIA MO 65205 | |
| TITLE | VCD | <input checked="" type="checkbox"/> Delete |
| NAME | TOLER, MARTY | |
| STREET ADDRESS | 1826 HIGHRIDGE DR | |
| CITY-ST-ZIP | COLUMBIA MO | |
| TITLE | T | <input type="checkbox"/> Delete |
| NAME | BOYER, BRUCE B | |
| STREET ADDRESS | 4409 SHORAM COURT | |
| CITY-ST-ZIP | COLUMBIA MO 65203 | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | | |
|----------------|--------------------|--|
| TITLE | C | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | Dan Scotten | |
| STREET ADDRESS | 1001 Rogers Street | |
| CITY-ST-ZIP | Columbia, MO 65216 | |
| TITLE | VC | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | Rich Montgomery | |
| STREET ADDRESS | 1001 Rogers Street | |
| CITY-ST-ZIP | Columbia, MO 65216 | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| 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 changed, or on an attachment with an address, with all other I am empowered.

SIGNATURE: *Michael T. Brouder* **2-28-00** **573-875-7200**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CRZE037 (9/99)