FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

'STRÉET ADDRESS City-St-Zip



FLORIDA DEPARTMENT OF STATE

FILED

May 02 1997 8:00am

Secretary of State

A CONTIGNATION OF A CONTINUOUS AND A STATEMENT OF A CONTINUOUS AND ARREST AND A CONTINUOUS ASSETTATION OF A CONTIN

Sandra B. Mortham

Secretary of State 'DIVISION OF CORPORATIONS

DOCUMENT # F9600000407 (4)

COLUMBIA CONSULTING GROUP, INC.

Principal Place of Business Mailing Address						I CROLING AND TRUIG BANK BEIN BONN DONN BONN BEIN BONN GIGN GONN GONN GONN GONN GONN GONN G		
20 S. CHARLES ST., 9TH FLOOR 20 S. CHARLES ST., 9TH								
BALTIMORE M	D 21201	BALTIMORE MD 21201	3220					
						3. Date Incorporated or Qualified 3a. Date of Last Report 01/24/1996		
2. Principal Place of Business 2a. Mailing Address						4. FEI Number Applied For		
21		26	26			52-1754125 Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				SR 75 Additional		
22		[27]				5. Certificate of Status Desired Fee Required		
City & State	е	City & State				6. Election Campaign Financing \$5.00 May Be		
23		28				Trust Fund Contribution		
Zip	Country	Zip		untry	•	8. This corporation has liability for intangible tax under s. 199.032,		
24	25	29	30	-,		Florida Statutes Yes No		
14/01	9. Name and Address of Curre	ent Hegistered Agent		81	Name	10. Name and Address of New Registered Agent		
	LFE, LARRY			01	Name			
200-A JOHN KNOX RD.				62	Street Add	ddress (P.O. Box Number is Not Acceptable)		
(AL)	LAHASSEE FL 32303-6643			83				
				63				
	•			84	City	FL 85 Zip Code		
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Stat	utos, the a	above	e-named cor	orporation submits this statement for the purpose of changing its registered		
office or r	egistered agent, or both, in the Stat m familiar with, and accept the obli	e of Florida. Such change wa: pations of, Section 607,0505	s authoriza Florida Sta	ed by	the corpora	oration's board of directors. I hereby accept the appointment as registered		
SIGNATURE	•	•						
	Signature, typed or printed name of registered a		OTE Register	ed Age	ont signature requ	equired when reinstating) OATE		
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PDC	L_J DELETE		IIILE		Change Addition		
NAME	HOLMES, LAWRENCE J	000	1.21	NAME				
STREET ADDRESS 20 S. CHARLES ST., 9TH FLOO		OUR	1.B 5	STHEET	ADDRESS			
CITY-ST-ZIP	BALTIMORE MD 21201		1.4 C/1Y		1 - ZIP			
TITLE	DC	☐ DELETE		2.1 TITLE		L Change Addition		
NAME	GAUTHIER, ROBERT C	000		NAME				
STREET ADDRESS 20 S. CHARLES ST., 9TH FLOOR		UUK	2.8 5	STREET	ADDRESS			
CITY-ST-ZIP	BALTIMORE MD 21201			2, 4 CITY - ST - ZIP				
TITLE		☐ DELETE	3.11			Change Addition		
NAME	MCNAMARA, TIMOTHY C 20 S. CHARLES ST., 9TH FL	∩∩ p		MAME				
STREET ADDRESS	BALTIMORE MD 21201	oun	8		ADDRESS			
CITY-ST-ZIP	DALIMONE MD 21201	DELETE		CITY-S	ST - ZIP	□ ∧		
TITLE		F-1 DELLE	411			☐ Change ☐ Addition		
NAME DYDUCK ADDRESS				NAME	1000100			
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP TITLE				4.4 C(1Y - S1 - Z(P 5.1 1)TLE		☐ Change ☐ Addition		
NAME						Citange Adoliton		
			5.21		*DDD: CC			
STREET ADDRESS					ADORESS			
CITY-ST-ZIP TITLE		DELETE	6.11	CITY - S	1 - ZIP	Change Addition		
.,			V.1	or a garden		LJ VIDINGO 1I ROGINON		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Further certify that the information indicated on this annual report or supplemental annual report is true and appurate 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 of frusted empowered by execute this report as required by Chapter 607, Florida Statutes; and that my name