2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2003
Secretary of State

DOCUMENT# M71821

Entity Name: ANDERSON COLUMBIA CO., INC.

Current Principal Place of Business:

2 GUERDON RD.
PO BOX 1829
LAKE CITY, FL 320561829

New Principal Place of Business:

Current Mailing Address:

2 GUERDON RD.
PO BOX 1829
LAKE CITY, FL 320561829

New Mailing Address:

FEI Number: 59-2871935 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCRAE, T H
2 GUERDON ROAD
LAKE CITY, FL 320561829 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CD ( ) Delete
Name: ANDERSON, JOE H III
Address: 2 GUERDON RD.
City-St-Zip: LAKE CITY, FL

Title: VTD ( ) Delete
Name: WALL-ANDERSON, HARRIETT
Address: 2 GUERDON RD.
City-St-Zip: LAKE CITY, FL

Title: PD ( ) Delete
Name: MCRAE, T H
Address: 2 GUERDON RD.
City-St-Zip: LAKE CITY, FL

Title: SD ( ) Delete
Name: SCREIBER, BRIAN
Address: 2 GUERDON RD
City-St-Zip: LAKE CITY, FL

Title: VD ( ) Delete
Name: ANDERSON, DOUGLAS M
Address: 2 GUERDON RD.
City-St-Zip: LAKE CITY, FL

Title: VD ( ) Delete
Name: CHILDERS, CINDY A
Address: 2 GUERDON RD.
City-St-Zip: LAKE CITY, FL 32056

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOE H ANDERSON III CD 04/23/2003

Electronic Signature of Signing Officer or Director — Date