2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2006 08:00 AM
Secretary of State

DOCUMENT # N00000004495

1. Entity Name
COLUMBIAN CLUB NO. 8104, INC.

Principal Place of Business	Mailing Address
5632 LAND O'LAKES BLVD. LAND O' LAKES, FL 34639	5632 LAND O'LAKES BLVD. LAND O' LAKES, FL 34639

DO NOT WRITE IN THIS SPACE

01232006 No Chg-NP CR2E037 (11/05)

4. FEI Number
59-3672451
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

INHOFER, JOHN D
5632 LAND O'LAKES BLVD.
LAND O' LAKES, FL 34639

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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 ~~John D. Inhofer~~ ~~1/26/2006~~
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000418435
02/14/06-80008-009 61.25

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	INHOFER, JOHN D
STREET ADDRESS	4504 PARKWAY BLVD.
CITY-ST-ZIP	LAND O' LAKES, FL 34639
TITLE	VD
NAME	MULRENIN, PHIL
STREET ADDRESS	22176 WEEKS BLVD.
CITY-ST-ZIP	LAND O' LAKES, FL 34639
TITLE	TD
NAME	MITCHELL, JOHN
STREET ADDRESS	22912 CYPRESS TRAIL DR.
CITY-ST-ZIP	LUTZ, FL 33549
TITLE	TD
NAME	GARDNER, J. ROBERT
STREET ADDRESS	19805 READING RD.
CITY-ST-ZIP	LUTZ, FL 33549
TITLE	SD
NAME	PANICO, ROBERT
STREET ADDRESS	2202 GROVELAND DR.
CITY-ST-ZIP	LUTZ, FL 33549
TITLE	SD
NAME	GARCIA, FELIX
STREET ADDRESS	3752 MERIDEAN PLACE
CITY-ST-ZIP	LAND O' LAKES, FL 34639

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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 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: John D. Inhofer John D Inhofer Jan 24-06 813-966-3099
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #