

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001654

FILED  
Jan 22, 2008  
Secretary of State

Entity Name: THE COLUMBIAN ASSOCIATION OF JACKSONVILLE, FLORIDA. INC

**Current Principal Place of Business:**

3920 OLD MIDDLEBURG ROAD  
JACKSONVILLE, FL 32210

**New Principal Place of Business:**

**Current Mailing Address:**

3920 OLD MIDDLEBURG ROAD  
JACKSONVILLE, FL 32210

**New Mailing Address:**

FEI Number: 59-1349292

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MCGILL, HARRY  
3920 OLD MIDDLEBURG ROAD  
JACKSONVILLE, FL 32210 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

**OFFICERS AND DIRECTORS:**

Title: VP ( ) Delete  
Name: MOORE, LEO  
Address: 7403 PROXIMA ROAD  
City-St-Zip: JACKSONVILLE, FL 32210

Title: P ( ) Delete  
Name: MCGILL, HARRY  
Address: 3920 OLD MIDDLEBURG RD  
City-St-Zip: JACKSONVILLE, FL 32210

Title: T ( ) Delete  
Name: TOOMEY, STEVE  
Address: 3864 BRAMBLE RD  
City-St-Zip: JACKSONVILLE, FL 32210

Title: S ( ) Delete  
Name: EBREO, CHRISTOPHER  
Address: 3564 ANVERS BLVD  
City-St-Zip: JACKSONVILLE, FL 32210

Title: D ( ) Delete  
Name: CLAUDIO, THOMAS  
Address: 1684 SPRING BRANCH DR E  
City-St-Zip: JACKSONVILLE, FL 32221

Title: D ( ) Delete  
Name: AVILES, NELSON  
Address: 3920 OLD MIDDLEBURG RD  
City-St-Zip: JACKSONVILLE, FL 32210

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: T (X) Change ( ) Addition  
Name: LATO, EDDIE  
Address: 1540 LAVILLA DR NORTH  
City-St-Zip: JACKSONVILLE, FL 32221

Title: S (X) Change ( ) Addition  
Name: ROSSI, FRANK  
Address: 3312 ST. JOHNS AVE  
City-St-Zip: JACKSONVILLE, FL 32205

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 exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HARRY R. MCGILL

P

01/22/2008

Electronic Signature of Signing Officer or Director

Date