

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001654

FILED
Apr 18, 2010
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:

AVILES, NELSON A
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
Name: MOORE, LEO H
Address: 7403 PROXIMA RD
City-St-Zip: JACKSONVILLE, FL 32210

Title: P
Name: AVILES, NELSON A
Address: 2153 LAKE SHORE BLVD
City-St-Zip: JACKSONVILLE, FL 32205

Title: T
Name: ROSSI, FRANK A
Address: 3312 ST. JOHNS AVENUE
City-St-Zip: JACKSONVILLE, FL 32205

Title: S
Name: KAYSER, KARL D
Address: 1721 LINARES WAY
City-St-Zip: JACKSONVILLE, FL 32221

Title: D
Name: RAYMOND, TAGLIONE J
Address: 10102 PARMAN RD
City-St-Zip: JACKSONVILLE, FL 32222

Title: D
Name: KANZASZKA, CHARLES JR
Address: 660 WELLHOUSE DR
City-St-Zip: JACKSONVILLE, FL 32220

I hereby 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 all other like empowered.

SIGNATURE: NELSON A. AVILES

PRES

04/18/2010

Electronic Signature of Signing Officer or Director

Date