


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 17, 2004 08:00 AM
Secretary of State

DOCUMENT # N13137 1. Entity Name COLUMBIAN #1, INC.	
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Principal Place of Business 5850 KOFC DRIVE PORT RICHEY, FL 34668	Mailing Address P O BOX #368 PORT RICHEY, FL 34668 US
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01232004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3059658	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent ALTMAN, JAMES J 5539 DELAWARE AVE NEW PT RICHEY, FL 34652	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

Filing Fee is \$61.25 Due by May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000160515 05/17/04-80001-009 61.25
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ROSATO, STEPHEN 1001 OLD ORCHARD LANE PORT RICHEY, FL 34668
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVP THOMAS, GEORGE 3729 HAVEN DRIVE NEW PORT RICHEY, FL 34652
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T GIACCHINO, CHARLES 1741 PERCHERON DRIVE NEW PORT RICHEY, FL 34665
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS SPURGEON, LEE 5822 GULF BLVD NEW PORT RICHEY, FL 34652
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify 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 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: *Lee A. Spurgeon* **LEE H. SPURGEON** 5/14/04 (727) 514-3116
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #