2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15636

FILED Feb 23, 2008 Secretary of State

Entity Name: COLUMBUS CLUB OF FORT PIERCE, INC.

Current Principal Place of Business: New Principal Place of Business: FORT PIERCE, FL 34950 **Current Mailing Address: New Mailing Address:** 2046 S. U.S. 1 FORT PIERCE, FL 34950 FEI Number: 59-6152866 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GRISSOM, WILLIAM L 1311-A PÉPPERTREE TRAIL FORT PIERCE, FL 34950 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete CARUSO, ANTHONY P BORROW, ANTHONY R PRES. Name: Name: 361 HERNANDO STREET Address: 604 JUAN ORTIZ Address: City-St-Zip: FORT PIERCE, FL 34949 City-St-Zip: FORT PIERCE, FL 34947 Title: Title: (X) Change () Addition () Delete WAGNER, ADAM S Name: CARUSO, ANTHONY P Name: Address: 4001 S. INDIAN RIVER DR. Address: 361 HERNANDO STREET City-St-Zip: FORT PIERCE, FL 34982 City-St-Zip: FORT PIERCE, FL 34949 Title: () Delete Title: (X) Change () Addition RING, STEPHEN A SCHUCKER, KARL A Name: Name: 740 TIMBER RIDGE TRAIL S.W. Address: Address: 3208 SUNRISE BLVD. City-St-Zip: VERO BEACH, FL 32962 City-St-Zip: FORT PIERCE, FL 34982 Title: () Delete Title: () Change () Addition Name: WOLF, RICHARD E Name: Address: 2716 PLACID AVENUE Address: City-St-Zip: FT. PIERCE, FL 34982 City-St-Zip: Title: () Delete Title: () Change () Addition SIMONE, PETER E Name: Name: 3120 NORTH A-1-A 401 S Address: Address: City-St-Zip: FORT PIERCE, FL 34949 City-St-Zip: Title: () Delete Title: () Change () Addition MAUGHAN, JOHN J Name: Name: Address: 3049 FAIRWAY DR. Address: FT. PIERCE, FL 34982 City-St-Zip: 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: ANTHONY R. BORROW PRES 02/23/2008