

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2008 8:00 am
Secretary of State

02-25-2008 90055 047 ****61.25

DOCUMENT # N18271 1. Entity Name COLUMBIAN CLUB OF FLAGLER COUNTY, INC.					
Principal Place of Business 51 OLD KINGS ROAD PALM COAST, FL 32137			Mailing Address P.O. BOX 350219 PALM COAST, FL 32137-0219		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip Country		City & State Zip Country		4. FEI Number 59-3081983	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent SAPIENZA, STEPHEN P 300 N. STATE STREET BUNNELL, FL 32110			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PDM BARLETTA, LOUIS 15 FARNDALE LN PALM COAST, FL 32184 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD SKRZPINSKI, RICHARD I 10 WALDORF PL PALM COAST, FL 32184 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD MEISTER, WILLIAM A 126 WHISPERING PINE DR PALM COAST, FL 32184 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TDM MCDEVITT, JOSEPH L 4 RAMBER PL PALM COAST, FL 32184 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MERZ, JOSEPH G 74 FLEMING CT PALM COAST, FL 32137 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CANNATA, DOMINICK 10 FIELDING LN PALM COAST, FL 32137 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: <u>William A. Meister</u> WILLIAM A. MEISTER, SECRETARY 2/20/08 386 446-5632 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

SEE ATTACHED
LIST.

Columbian Club of Flagler County, Inc.
2008 Officers and Directors

ATTACHMENT
40031578
#N18271

Title: P/D
Name: SALEMI, Ciro
Address: 84 Burbank Drive
City-ST-ZIP Palm Coast, FL 32137

Title: D
Name: CLYMER, Kenneth
Address: 12 Blasdell Court
City-ST-ZIP Palm Coast, FL 32137

Title: V/D
Name: GENEVE, Louis
Address: 8 Pacific Drive
City-ST-ZIP Palm Coast, FL 32164

Title: D
Name: SKRZYPINSI, Richard I.
Address: 10 Waldorf Place
City-ST-ZIP Palm Coast, FL 32164

Title: T/D
Name: SEPE, Nicholas J.
Address: 93 Eastwood Drive
City-ST-ZIP Palm Coast, FL 32164

Title: D
Name: SMITH, William T.
Address: 34 Westchester Lane
City-ST-ZIP Palm Coast, FL 32164

Title: S/D
Name: MEISTER, William A.
Address: 126 Whispering Pine Drive
City-ST-ZIP Palm Coast, FL 32164

Title: D
Name: MERZ, Joseph G.
Address: 29 Cormorant Court
City-ST-ZIP Palm Coast, FL 32137

Title: D/M
Name: BARLETTA, Louis
Address: 15 Farmdale Lane
City-ST-ZIP Palm Coast, FL 32137

Title: D
Name: RUTIGLIANO, Salvatore
Address: 1 Bill Court
City-ST-ZIP Palm Coast, FL 32137

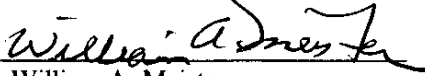
Title: D/M
Name: BROWN, William F.
Address: 45 Covington Lane
City-ST-ZIP Palm Coast, FL 32137

Title: D
Name: EDSELL, John
Address: 50 Bassett Lane
City-ST-ZIP Palm Coast, FL 32137

Title: D
Name: CANNATTA, Dominick
Address: 10 Fielding Lane
City-ST-ZIP Palm Coast, FL 32137

This information is supplied with Document #N18271

For: Columbian Club of Flagler County, Inc.
51 Old Kings Road North
Palm Coast, FL 32137

By: 
William A. Meister
Secretary (386) 446-5632 February 19, 2008