

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22588

FILED
Feb 13, 2007
Secretary of State

Entity Name: COLUMBIAN CLUB #2, INC.

Current Principal Place of Business:

2040 GRAND BLVD
HOLIDAY, FL 34690 US

New Principal Place of Business:

Current Mailing Address:

2040 GRAND BLVD
HOLIDAY, FL 34690 US

New Mailing Address:

FEI Number: 59-2965081

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAGARDO, ED
2040 GRAND BLVD
HOLIDAY, FL 34690 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: P () Delete
Name: PRINCE, TONY
Address: 7318 BRAMBLEWOOD DR.
City-St-Zip: PORT RICHEY, FL 34668

Title: D () Delete
Name: MALTA, LARRY
Address: 8213 LEARY CT.
City-St-Zip: PORT RICHEY, FL 34668

Title: D () Delete
Name: PLAGENS, WALTER
Address: 3159 WEST JACKSON DR.
City-St-Zip: HOLIDAY, FL 34691

Title: D () Delete
Name: KOSCH, WILLIAM
Address: 8214 TARSIER AVE
City-St-Zip: NEW PORT RICHEY, FL 34653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: JAMES, FARRELL
Address: 3710 BEECHWOOD DR.
City-St-Zip: HOLIDAY, FL 34691

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

Title: D (X) Change () Addition
Name: ART, MORRILL
Address: 3315 MATCHLOCK DR.
City-St-Zip: HOLIDAY, FL 34690

I hereby certify that the information supplied with this filing does not qualify for the 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: ED MAGARDO

RA

02/13/2007

Electronic Signature of Signing Officer or Director

Date