

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N30442

**FILED**  
**Jan 20, 2011**  
**Secretary of State**

**Entity Name:** COLUMBIA COUNTY QUARTERBACK CLUB, INC.

**Current Principal Place of Business:**

469 SE FIGHTING TIGER DR  
LAKE CITY, FL 32025

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 774  
LAKE CITY, FL 32056

**New Mailing Address:**

**FEI Number:** 59-2488935

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BISHOP, BOBBY  
142 SW BLAINE COURT  
LAKE CITY, FL 32025 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: PRES  
Name: LUNDE, BLAKE  
Address: 119 NW GRAY GLEN  
City-St-Zip: LAKE CITY, FL 32055

Title: PELE  
Name: MARTINO, JOE  
Address: 144SW HANCOCK COURT  
City-St-Zip: LAKE CITY, FL 32024

Title: VPRE  
Name: REITER, TERRY  
Address: 225 SW FRITZ GLEN  
City-St-Zip: LAKE CITY, FL 32024

Title: TREA  
Name: BISHOP, BOBBY  
Address: 142 SW BLAINE CT  
City-St-Zip: LAKE CITY, FL 32025

Title: SECT  
Name: ROBINSON, JOE  
Address: PO BOX 63  
City-St-Zip: LAKE CITY, FL 32056

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: BOBBY BISHOP

TREA

01/20/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date