2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40838

FILED Apr 19, 2004 Secretary of State

Entity Name: COLUMBIA COUNTY LANDLORD'S ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O DEAN KIRCHNER
RT 22 BOX 857
LAKE CITY, FL 32024
US
C/O DEAN KIRCHNER
161 SW DANTE TERRACE
LAKE CITY, FL 32024
US
LAKE CITY, FL 32024
US

Current Mailing Address: New Mailing Address:

C/O DEAN KIRCHNER
RT 22 BOX 857
LAKE CITY, FL 32024 US

C/O DEAN KIRCHNER
161 SW DANTE TERRACE
LAKE CITY, FL 32024 US

FEI Number: 59-2891179 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:

KIRCHNER, DEAN
RT 22 BOX 857
LAKE CITY, FL 32024

KIRCHNER, DEAN
161 SW DANTE TERRACE
LAKE CITY, FL 32024

LAKE CITY, FL 32024

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: 04/19/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:PD () DeleteTitle:PD (X) Change () AdditionName:KIRCHNER, DEANName:KIRCHNER, DEANAddress:RT. 22 BOX 857Address:161 SW DANTE TERRACE

Address: RT. 22 BOX 857 Address: 161 SW DANTE TERRACE
City-St-Zip: LAKE CITY, FL 32024 City-St-Zip: LAKE CITY, FL 32024

Title: VPD () Delete Title: () Change () Addition Name: PIERCE, JOHN Name:

 Name:
 PIERCE, JOHN
 Name:

 Address:
 RT. 30 BOX 1146
 Address:

 City-St-Zip:
 LAKE CITY, FL 32055
 City-St-Zip:

Title: STD () Delete Title: STD (X) Change () Addition

 Name:
 KIRCHNER, DEAN
 Name:
 KIRCHNER, DEAN

 Address:
 RT 22 BOX 857
 Address:
 161 SW DANTE TERRACE

 City-St-Zip:
 LAKE CITY, FL 32024
 City-St-Zip:
 LAKE CITY, FL 32024

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DEAN KIRCHNER PRES 04/19/2004