

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001022

FILED
Apr 27, 2005
Secretary of State

Entity Name: COLUMBIAN CLUB 10377, INC.

Current Principal Place of Business:

8014 STATE ROAD 52
HUDSON, FL 34667

New Principal Place of Business:

Current Mailing Address:

8014 STATE ROAD 52
HUDSON, FL 34667

New Mailing Address:

FEI Number: 59-3369370

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MULLEN, THOMAS J
13300 WOODWARD DR.
BAYONET POINT, FL 34667 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: MULLEN, THOMAS J
Address: 13300 WOODWARD DR.
City-St-Zip: BAYONET PT., FL 34667

Title: V () Delete
Name: DODD, ROBERT
Address: 8521 WINDING WOOD DR.
City-St-Zip: PORT RICHEY, FL 34668

Title: T () Delete
Name: GRABOWSKI, STEPHEN J
Address: 2813 SHIPSTON AVE
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: S () Delete
Name: STANELY, THOMAS E
Address: 13953 TENNYSON DR.
City-St-Zip: HUDSON, FL 34667

Title: D () Delete
Name: O'CONNOR, MICHAEL
Address: 8800 CADHAY DRIVE
City-St-Zip: HUDSON, FL 34667

Title: D () Delete
Name: SULLIVAN, THOMAS A
Address: 13524 ALLYN DRIVE
City-St-Zip: HUDSON, FL 34667

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: O'CONNOR, MICHAEL
Address: 8800 CADHAY DRIVE
City-St-Zip: BAYONET PT., FL 34667

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

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

Title: S (X) Change () Addition
Name: MORGUS, WALLACE E
Address: 8808 KEATS DRIVE
City-St-Zip: HUDSON, FL 34667

Title: D (X) Change () Addition
Name: MULLEN, THOMAS J
Address: 13300 WOODWARD DRIVE
City-St-Zip: HUDSON, FL 34667

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

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: THOMAS J. MULLEN

RA

04/27/2005

Electronic Signature of Signing Officer or Director

Date