

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 23 1996 8:00 am
Secretary of State

DOCUMENT # P39331
1. Corporation Name

COLUMBIA LAND AND DEVELOPMENT CORPORATION

Principal Place of Business Mailing Address
c/o Terence R. McAuliffe c/o Terence R. McAuliffe
1341 G Street N.W. 1341 G Street N.W.
Suite 200 Suite 200
Washington, D.C. 20005 Washington, D.C. 20005

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21	Suite, Apt # etc	26	Suite, Apt #, etc	6/22/1992	4/95
22	City & State	27	City & State	4. FEI Number	Applied For
23	Zip	28	Zip	52-1773787	Not Applicable
24	Country	29	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
25		30		<input type="checkbox"/>	\$5.00 May Be Added to Fees
				6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
Swann, Hadley, Denion & Alvarez, P.A. 1031 W. Morse Blvd.; Suite 270 Winter Park, FL 32789				81 Name	Swann, Hadley & Alvarez, P.A.		
				82 Street Address (P.O. Box Number is Not Acceptable)	1031 W. Morse Blvd.		
				83	Suite 270		
				84 City	FL	85 Zip Code	32789

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept, the obligations of Section 607.0505, Florida Statutes.

4-17-1996

SIGNATURE: *[Signature]* (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	<input type="checkbox"/> DELETE		1 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	McAuliffe, Terence R.			12 NAME			
STREET ADDRESS	c/o 1341 G Street N.W.			13 STREET ADDRESS			
CITY - ST - ZIP	Washington, D.C. 20005			14 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE	VST McAuliffe, Dorothy S.	<input type="checkbox"/> DELETE		2 1 TITLE			
NAME				22 NAME			
STREET ADDRESS	c/o 1341 G Street N.W.			23 STREET ADDRESS			
CITY - ST - ZIP	Washington, D.C. 20005			24 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE	VP Swann, Christian M.	<input type="checkbox"/> DELETE		3 1 TITLE			
NAME				32 NAME			
STREET ADDRESS	1031 W. Morse Blvd.; Suite 270			33 STREET ADDRESS			
CITY - ST - ZIP	Winter Park, FL 32789			34 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE		<input type="checkbox"/> DELETE		4 1 TITLE			
NAME				42 NAME	100001792501		
STREET ADDRESS				43 STREET ADDRESS	-04/24/96--01050--002		
CITY - ST - ZIP				44 CITY - ST - ZIP	***200.00		
TITLE		<input type="checkbox"/> DELETE		5 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				52 NAME			
STREET ADDRESS				53 STREET ADDRESS			
CITY - ST - ZIP				54 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE		<input type="checkbox"/> DELETE		6 1 TITLE			
NAME				62 NAME			
STREET ADDRESS				63 STREET ADDRESS			
CITY - ST - ZIP				64 CITY - ST - ZIP			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *[Signature]* Christian M. Swann 4-17-96 (407)747-2777

CR2E034 (12/95)

7/2/96