FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

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

APPROVED AND FILED
'95 APR 21 PM 1:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000076139 (3)**

1. Corporation Name
COLUMBIA FINANCIAL HOLDING COMPANY

Principal Place of Business	Mailing Address
529 VERSAILLES DR. SUITE 210 MAITLAND FL 32751	529 VERSAILLES DR. SUITE 210 MAITLAND FL 32751

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **11/03/1993**
3a. Date of Last Report: **05/01/1994**

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22) (27)
City & State (23) (28)
Zip (24) Country (25) Zip (29) Country (30)

4. FEI Number: **59-3206600** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

BAILEY, MARK S
529 VERSAILLES DRIVE
SUITE 210
MAITLAND FL 32751

10. Name and Address of New Registered Agent

81 Name: Swann, Hadley, Denion & Alvarez,P.A.
82 Street Address (P.O. Box Number is Not Acceptable): 1031 W. Morse Blvd.;
83: Suite 270
84 City: Winter Park 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.

SIGNATURE: _____ Ralph V. Hadley, III, V.P. 3-7-1995
Signature, typed or printed name of registered agent and title if [illegible] (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☐ Change ☐ Addition
NAME	MCAULIFFE, TERENCE R	12 NAME	
STREET ADDRESS	1341 G STREET N.W., SUITE 200	13 STREET ADDRESS	
CITY-ST-ZIP	WASHINGTON DC 20005	14 CITY-ST-ZIP	
TITLE	D	21 TITLE	☐ Change ☐ Addition
NAME	MCAULIFFE, DOROTHY S	22 NAME	
STREET ADDRESS	1341 G STREET N.W., SUITE 200	23 STREET ADDRESS	
CITY-ST-ZIP	WASHINGTON DC 20005	24 CITY-ST-ZIP	
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	MEARS, PAUL S JR.	32 NAME	
STREET ADDRESS	5030 OAK ISLAND RD.	33 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32809	34 CITY-ST-ZIP	
TITLE	D	41 TITLE	☐ Change ☐ Addition
NAME	KELLY, DARWIN P JR.	42 NAME	
STREET ADDRESS	2418 TIOGA TRAIL	43 STREET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL 32789	44 CITY-ST-ZIP	
TITLE	D	51 TITLE	☐ Change ☐ Addition
NAME	BARNES, JAMES T JR.	52 NAME	
STREET ADDRESS	7 ISLE OF SICILY	53 STREET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL 32789	54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
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)(i), 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 added or attached with an address.

SIGNATURE: _____ 3/20/95 202-783-3453
SIGNATURE AND TITLE OF PERSON OR NAME OF ACTING OFFICER OR DIRECTOR — Date — Daytime Phone #

0041000 CP