

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**FILED**  
**Jul 15, 1999 8:00 am**  
**Secretary of State**

07-15-1999 90017 018 \*\*\*550.00

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P95000075498**

1. Corporation Name

**CLUB COLOMBIA, SOUTHWEST FLORIDA COLOMBIAN AMERICAN ASSOCIATION, INC.**



DO NOT WRITE IN THIS SPACE

Principal Place of Business

1507 S.W. 20TH AVE.  
CAPE CORAL FL 33991

Mailing Address

1507 S.W. 20TH AVE.  
CAPE CORAL FL 33991

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

25

2a. Mailing Address

26 P.O. BOX #151988

27 Suite, Apt. #, etc.

28 City & State

CAPE CORAL, FL

29 Zip Country

33915

30 LEE

3. Date Incorporated or Qualified

09/28/1995

4. FEI Number

65-0632236

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 owes the current year Intangible  
Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

LISZEWSKI, LEONARD L  
2110 CLEVELAND AVE.  
FT. MYERS FL 33991

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE  
NAME VILLAMIZAR, RAUL  
STREET ADDRESS 1808 ACACIA AVENUE  
CITY-ST-ZIP LEHIGH ACRES FL 33990

TITLE VD ☒ DELETE  
NAME GOMEZ, FERNANDO  
STREET ADDRESS 1507 SW 20TH AVENUE  
CITY-ST-ZIP CAPE CORAL FL 33991

TITLE SD ☒ DELETE  
NAME FLEMING, LIGIA  
STREET ADDRESS 1814 SW 18TH TERRACE  
CITY-ST-ZIP CAPE CORAL FL 33991

TITLE TD ☒ DELETE  
NAME HERNANDEZ, YESID  
STREET ADDRESS 137 SE 18TH STREET  
CITY-ST-ZIP CAPE CORAL FL 33990

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition  
1.2 NAME HERNANDEZ, YESID  
1.3 STREET ADDRESS 137 S.E 18th Street  
1.4 CITY-ST-ZIP Cape Coral FL, 33990

2.1 TITLE VP ☒ Change ☐ Addition  
2.2 NAME Quinonez, Reinaldo  
2.3 STREET ADDRESS 2318 S.E. 16St  
2.4 CITY-ST-ZIP Cape Coral FL, 33990

3.1 TITLE SD ☒ Change ☐ Addition  
3.2 NAME Trikalinos, Loren  
3.3 STREET ADDRESS 1112 S.W. 52 Street  
3.4 CITY-ST-ZIP Cape Coral FL, 33914

4.1 TITLE TD ☒ Change ☐ Addition  
4.2 NAME Gonzalez, Jaime  
4.3 STREET ADDRESS 2226 S.E. 1St  
4.4 CITY-ST-ZIP Cape Coral FL, 33990

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

**Yesid Hernandez**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

02/19/99 (941) 939 8140

CR2E034 (11/98)