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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000071559

Country

1. Corporation Name

COLUMBIA BLOCK, INC.

Principal Place of Business
601 SOUTH FIRST STREET LAKE CITY FL 32025

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

23

Zip

Mailing Address

2a. Mailing Address P. O. BOX 2101

City & State

Suite, Apt. #, etc.

LAKE City

26

27

28

601 SOUTH FIRST STREET LAKE CITY FL 32025

FILED Mar 01, 1999 8:00 am **Secretary of State**

03-01-1999 90026 005 ***150.00

)	
	DO NOT WRITE IN TH	IIS SPACE
3.	Date Incorporated or Qualifed	
	08/18/1997	
4.	FEI Number	Applied For
	59-3462417	Not Applicable
5.	Certificate of Status Desired	\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

3.

6. Election Campaign Financing

8. This corporation owes the current year Intangible

Trust Fund Contribution

24	25	29 <i>32054</i>	-2101	30			Personal Property Tax.		Yes	□No
9. Name and Address of Current Registered Agent						10. Name and Address of New F	Registered Ag	ent		
					81	Name		4		
EADIE, RENNY B III			82	Stroot	Address (P.O. Box Number is Not Accepta	able)	-	_		
601 SOUTH FIRST STREET				102	3116617	Address (F.O. Box Number is Not Accept	1010)			
LAKE CITY FL 32025			83							
							· · · · · · · · · · · · · · · · · · ·			
					84	City		FL	85 Zip	Code
office or	to the provisions of Sections 607 registered agent, or both, in the Sam familiar with, and accept the ob	tate of Florida. Such c	hange was a	authorize	ed by t	-named he corpo	corporation submits this statement for the pration's board of directors. I hereby accep	purpose of chapt the appointment	anging its nent as re	registered gistered
SIGNATURE										
-:-	Signature, typed or printed name of registere		(NOT			signature n	equired when reinstating)	DATE AND	DIRECT	DE IN 12
12.		S AND DIRECTORS	DELETE	13			ADDITIONS/CHANGES TO OF		Change	Addition
TITLE	P	L] DECE IE		TITLE		EAdie, Renny BIL		M Onlange	
NAMÉ	EADIE, RENNY B III				NAME		R+ 22 Box 2913			
STREET ADDRESS				1.3 3	STREET.	ADDRESS				
CITY-ST-ZIP	LAKE CITY FL 32025			_	CITY-ST	-ZIP	LAKE City, F1 32024-9			
TITLE		L	DELETE	2.1	TITLE			Ł	Change	☐ Addition
NAME				2.21	NAME					
STREET ADDRESS				2.3 8	STREET	ADDRESS				
CITY-ST-ZIP				2. 4	CITY-ST	-ZIP				
TITLE		[] DELETE	3.1	TITLE				Change	☐ Addition
NAME				3.2	NAME					
STREET ADDRESS	i			3.3	STREET	ADDRESS				
CITY-ST-ZIP				3.4.	CITY-ST	- ZIP				
TITLE		ĺ.	DELETE	4.1	TITLE				☐ Change	☐ Addition
NAME				4.2	NAME					
STREET ADORESS)			4.3	STREET	ADDRESS				
CITY-ST-ZIP				4.4 (CITY-ST	-ZIP				
TITLE			DELETE	5.1	TITLE				Change	Addition
NAME				5.21	NAME					
STREET ADDRESS				5.3	STREET	ADDRESS				
CITY, ST. 7ID	1			5.4	CITY-ST	- ZIP				

Country

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 suppliemental 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 on an attachment with a address, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

KENNY B. EADIE III NATURE AND PRED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

☐ Addition