

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 724726

**FILED**  
**Apr 23, 2015**  
**Secretary of State**  
**CC4623817879**

**Entity Name:** THE WEST VOLUSIA COLUMBIAN CLUB, INC.

**Current Principal Place of Business:**

230 E. INTERNATIONAL SPEEDWAY BLVD  
DELAND, FL 32724

**Current Mailing Address:**

P.O.BOX 601  
DELAND, FL 32721-0601 US

**FEI Number:** 23-7278659

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SAVONAROLA, DAVID JD  
3382 MORNING DOVE DRIVE  
DELAND, FL 32720 US

*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

**Officer/Director Detail :**

Title P  
Name CONSTANTINO, GEORGE R  
Address P.O. BOX 731886  
City-State-Zip: ORMOND BEACH FL 32173

Title VP  
Name GRAVES, MICHAEL L  
Address 960 E. UNIVERSITY AVE  
City-State-Zip: DELAND FL 32724

Title ST  
Name SHORT, RAYMOND J  
Address 2102 SPRUCE STREET  
City-State-Zip: DELAND FL 32724

Title D  
Name RIVERS, LARRY T  
Address 616 BROOKFIELD TERRACE  
City-State-Zip: DELAND FL 32724

Title D  
Name GARY, DENNIS J  
Address 215 RAINTREE CIRCLE  
City-State-Zip: DELAND FL 32724

Title D  
Name SAVONAROLA, DAVID J  
Address 3382 MORNING DOVE DRIVE  
City-State-Zip: DELAND FL 32720

Title DIRECTOR  
Name WOODS, PETER T.  
Address 869 LIBERTY COURT  
City-State-Zip: DELAND FL 32724

*I hereby 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 all other like empowered.*

**SIGNATURE:** DAVID J. SAVONAROLA

**DIRECTOR**

**04/23/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date