

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734935

Entity Name: COLUMBIA CLUB OF OSCEOLA COUNTY, INC.**Current Principal Place of Business:**2000 NEPTUNE ROAD
KISSIMMEE, FL 34744**Current Mailing Address:**2000 NEPTUNE ROAD
KISSIMMEE, FL 34744 US**FEI Number:** 59-2198526**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SCHONEFELD, JAMES J
3242 HAWKS NEST DRIVE
KISSIMMEE, FL 34741 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	DIRECTOR
Name	HALLOS, JAMES T
Address	1002 PLANTATION DR APT F1
City-State-Zip:	KISSIMMEE FL 34741

Title	TREASURER
Name	FALLIS, TERRY A
Address	5620 LAKE LIZZIE DR LOT 32
City-State-Zip:	ST CLOUD FL 34771

Title	DIRECTOR
Name	SCHONEFELD, JAMES J
Address	3242 HAWKS NEST DRIVE
City-State-Zip:	KISSIMMEE FL 34741

Title	SECRETARY
Name	SIKORSKI, RICHARD
Address	107 MILTA
City-State-Zip:	KISSIMMEE FL 34743

Title	D
Name	STODOLSKI, BOYD
Address	164 CLUB VILLAS LANE
City-State-Zip:	KISSIMMEE FL 34744

Title	PRESIDENT
Name	ROTHER, HARRY J
Address	4539 ROSS LANIER LANE
City-State-Zip:	KISSIMMEE FL 34758

Title	D
Name	CHOMA, STEPHEN A. JR.
Address	2670 ELLEN AVE
City-State-Zip:	KISSIMMEE FL 34744

Title	PRESIDENT
Name	MEYER, EDWARD J
Address	746 ROYAL PALM DR
City-State-Zip:	KISSIMMEE FL 34743

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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: JAMES J. SCHONEFELD**DIRECTOR****04/06/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title D
Name RABEAU, PHILLIP
Address 606 ROSARO CT
City-State-Zip: KISSIMMEE FL 34758

Title DIRECTOR
Name REED, MICHAEL A SR.
Address 2537 FOLIO WAY
City-State-Zip: KISSIMMEE FL 34741

Title DIRECTOR
Name KULATUNGA, NEIL W
Address 429 STILL ST
City-State-Zip: KISSIMMEE FL 34744