

2025 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# M71821

Entity Name: ANDERSON COLUMBIA CO., INC.**Current Principal Place of Business:**871 NW GUERDON STREET
LAKE CITY, FL 32055**Current Mailing Address:**P.O. BOX 1829
LAKE CITY, FL 32056-1829 US**FEI Number:** 59-2871935**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SCHREIBER, BRIAN
871 NW GUERDON ST
LAKE CITY, FL 32055 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:** BRIAN SCHREIBER

07/15/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P, D
Name ANDERSON III, JOE H.
Address 871 NW GUERDON STREET
City-State-Zip: LAKE CITY FL 32055

Title VP
Name WILLIAMS, TONY
Address 871 NW GUERDON STREET
City-State-Zip: LAKE CITY FL 32055

Title S, D
Name SCHREIBER, BRIAN
Address 871 NW GUERDON STREET
City-State-Zip: LAKE CITY FL 32055

Title VP, D
Name ANDERSON, DOUGLAS M
Address 871 NW GUERDON STREET
City-State-Zip: LAKE CITY FL 32055

Title VP, D
Name CHILDERS, CINDY A
Address 871 NW GUERDON STREET
City-State-Zip: LAKE CITY FL 32055

Title VP, D
Name STRICKLAND, GENE
Address 871 NW GUERDON STREET
City-State-Zip: LAKE CITY FL 32055

Title ASST. SECRETARY
Name MADDUX, ALISA
Address PO BOX 1829
City-State-Zip: LAKE CITY FL 32056

Title ASST. SECRETARY
Name STOLL, KATHY
Address P.O. BOX 1829
City-State-Zip: LAKE CITY FL 32055

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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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BRIAN SCHREIBER**SECRETARY**

07/15/2025

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name BOOTH, DOUG
Address 871 NW GUERDON STREET
City-State-Zip: LAKE CITY FL 32055

Title ASST SECRETARY
Name STAHL, SCHLEY
Address P.O. BOX 1829
City-State-Zip: LAKE CITY FL 32056

Title ASST. SECRETARY
Name JONES, JUSTIN
Address 871 NW GUERDON STREET
City-State-Zip: LAKE CITY FL 32055