

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G28682

1. Entity Name

CRYSTAL RIVER BANK

FILED
Jan 19, 2000 8:00 am
Secretary of State

01-19-2000 90305 026 ***150.00

Principal Place of Business

Mailing Address

865 NE HWY 19
CRYSTAL RIVER FL 34429
US

P.O. BOX 607
CRYSTAL RIVER FL 34423-0607
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-0706995

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DUMAS, BROWN JR.
291 SOUTH GARDENIA TERRACE
CRYSTAL RIVER FL 34429

Name

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

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME HAGAR, MARGARET A.
STREET ADDRESS 808 ZEPHR ST
CITY-ST-ZIP INVERNESS FL

TITLE D ☐ Change ☒ Addition
NAME Emerson, C. Jerry
STREET ADDRESS 2256 W Tee Circle
CITY-ST-ZIP Citrus Springs FL 34434

TITLE VCOB ☐ Delete
NAME BRANNEN, JOSEPH S
STREET ADDRESS 8394 E GULF TO LAKE HWY
CITY-ST-ZIP INVERNESS FL 34450

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME SABOURIN, EDMUND E.
STREET ADDRESS 220 N.E. 11TH ST.
CITY-ST-ZIP CRYSTAL RIVER FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PD ☐ Delete
NAME DUMAS, BROWN, JR.
STREET ADDRESS 291 S GARDENIA TERR
CITY-ST-ZIP CRYSTAL RIVER FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME ATWOOD, DAN
STREET ADDRESS 726 SW KINGS BAY DRIVE
CITY-ST-ZIP CRYSTAL RIVER FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE COB ☐ Delete
NAME BRANNEN, GEORGE H II
STREET ADDRESS 3300 S. PLEASANT GROVE ROAD
CITY-ST-ZIP INVERNESS FL 34451

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Brown Dumas, Jr.* Brown Dumas, Jr.

January 5, 2000 352-795-3451

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #