

**FILED**  
**Jul 04, 2002 8:00 am**  
**Secretary of State**

05-27-2002 90325 020 \*\*\*150.00

**FOR PROFIT CORPORATION**  
**UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # L18240

1. Entity Name

CRYSTAL RIVER REALTY, INC. ✓

DO NOT WRITE IN THIS SPACE

96526

2. Principal Place of Business

3760 N. PALOMINO TERRACE

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City &amp; State

BEVERLY HILLS, FL.

City &amp; State

4. FEI Number

59-3041409

Applied For

Not Applicable

Zip

34465

Country

USA

Zip

Country

5. Certificate of Status Desired

☐\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

MICHAEL J. TRINGALI

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

3760 N. PALOMINO TERRACE

City

BEVERLY HILLS

FL

Zip Code

34465

DO NOT WRITE  
IN THIS SPACE

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

*Michael J. Tringali*

MICHAEL J. TRINGALI

6-29-02

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)☒

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES, SEC, DIRECTOR MICHAEL J. TRINGALI 3760 N. PALOMINO TERRACE BEVERLY HILLS, FL. 34465	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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DO NOT WRITE  
IN THIS SPACE

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

MICHAEL J. TRINGALI

SIGNATURE:

*Michael J. Tringali*

4-30-02

352-527-3465

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2034B (12/01)