

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000000679

1. Entity Name

CITIZENS PRESERVATION COUNCIL, INC.

Principal Place of Business

2649 HOLMES CREEK ROAD
VERNON FL 32462

Mailing Address

P.O. BOX 530
VERNON FL 32462

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3622549

Applied For

Not Applicable

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

CARTER, LARRY
2649 HOLMES CREEK ROAD
VERNON FL 32462

Name Jennifer Musholt

Street Address (P.O. Box Number is Not Acceptable)
2738 Traverse Dr.

City Vernon

FL

Zip Code
32462

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 Jennifer Musholt

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

(NOTE: Registered Agent signature required when reinstating)

1-30-02

DATE



FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PT ☐ Delete
NAME CARTER, LARRY
STREET ADDRESS 2649 HOLMES CREEK ROAD
CITY-ST-ZIP VERNON FL 32462

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

TITLE T ☐ Delete
NAME MINER, JOE
STREET ADDRESS 1532 NEARINGHILL CIRCLE
CITY-ST-ZIP CHIPLEY FL 32428

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

TITLE T ☐ Delete
NAME MUSHOLT, JENNIFER
STREET ADDRESS 2738 TRAVERSE DRIVE
CITY-ST-ZIP VERNON FL 32462

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

TITLE T ☐ Delete
NAME MUSHOLT, PAUL
STREET ADDRESS 1023 HARRISON AVENUE
CITY-ST-ZIP PANAMA CITY FL 32401

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

TITLE T ☐ Delete
NAME MUSHOLT, DAVID
STREET ADDRESS 2738 TRAVERSE DRIVE
CITY-ST-ZIP VERNON FL 32462

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

TITLE T ☐ Delete
NAME MARSHALL, WALTER F
STREET ADDRESS 2650 HOLMES CREEK ROAD
CITY-ST-ZIP VERNON FL 32462

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

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jennifer Musholt, Treasurer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-30-02 850-785-3258

Date

Daytime Phone #

CR2E037 (9/01)