

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000001384

1. Entity Name: FRIENDS OF CRYSTAL RIVER STATE ARCH. SITE

FILED

10F2

01 MAY 23 PH 12:02

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address  
CRYSTAL RIVER ARCHAEOLOGICAL STATE PARK  
3400 N. MUSEUM POINTE  
CRYSTAL RIVER, FL 34428

2. Principal Place of Business

SEE ABOVE

3. Mailing Address

AS ABOVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

**NO FEE REQUIRED**

4. FEI Number

59-3638371

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

~~RICHARD CORCORAN, P.A. ESQ.~~  
538 N. CITRUS AVE  
CRYSTAL RIVER, FL 34428

7. Name and Address of New Registered Agent

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

FILE NOW: FEE IS \$61.25

After September 13, 2000 min. will be \$236.25

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

TITLE ☒ PRESIDENT / BOARD ☐ Delete  
NAME M.L. (LEA) CRAIG  
STREET ADDRESS P.O. Box 734  
CITY-ST-ZIP INVERNESS, FL 34451

TITLE ☒ RUSSELL DORSEY, V.P. ☐ Delete  
NAME 7160 GOSPEL ISLAND RD  
STREET ADDRESS INVERNESS, FL 34450  
CITY-ST-ZIP

TITLE ☒ SECRETARY / BOARD ☐ Delete  
NAME GARY ELLIS  
STREET ADDRESS 5990 N. TALLAHASSEE RD.  
CITY-ST-ZIP CRYSTAL RIVER, FL 34428

TITLE ☒ BOARD ☐ Delete  
NAME OWIDA WHITE  
STREET ADDRESS 2130 14TH ST N.W.  
CITY-ST-ZIP CRYSTAL RIVER, FL 34428

TITLE ☒ BOARD ☐ Delete  
NAME GILBERT A. LEVY, M.D.  
STREET ADDRESS P.O. Box 725  
CITY-ST-ZIP DUNNELLON, FL 34430

TITLE ☐ ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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NAME  
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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: MARY L. CRAIG

4/10/01



Jeb Bush  
Governor

# Department of Environmental Protection

Marjory Stoneman Douglas Building  
3900 Commonwealth Boulevard  
Tallahassee, Florida 32399-3000

David B. Struhs  
Secretary

April 23, 2001

Ms. Cathy Stauffer  
Division of Corporations  
Florida Department of State  
Post Office Box 6327  
Tallahassee, Florida 32314

Dear Ms. Stauffer:

This letter is to certify to you that Friends of Crystal River State Archaeological Site, Inc., is a duly authorized citizen support organization which is under contract to provide support for the Division of Recreation and Parks in accordance with Section 258.015, F.S. Pursuant to F.S. 617.0122, this filing is exempt from any fee's when certified by this department.

After filing, please return certified documents to Phillip Werndli at the above address, MS 535. If further information is needed feel free to call him at 488-8243.

Sincerely,

Fran P. Mainella, CPRP  
Director  
Division of Recreation and Parks

FPM/pwb

Attachments