

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 03, 2006 8:00 am**  
**Secretary of State**

04-03-2006 90415 024 \*\*\*\*70.00

**DOCUMENT # N01000005348**

1. Entity Name  
**DIXIE, GILCHRIST, LEVY TOURIST DEVELOPMENT  
BOARD, INC.**



Principal Place of Business  
**380 S. COURT STREET  
BRONSON, FL 32621**

Mailing Address  
**P.O. BOX 779  
CEDAR KEY, FL 32625**

00000067



2. Principal Place of Business

**320 S. Main Street**

3. Mailing Address

**P.O. Box 214**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02032006

Chg-NP

CR2E037 (11/05)

City & State

**Trenton, Florida**

City & State

**Trenton, Florida**

4. FEI Number

**59-3731924**

Applied For

Not Applicable

Zip

**32693**

Country

**United States**

Zip

**32693**

Country

**United States**

5. Certificate of Status Desired

☒

**\$8.75 Additional**

**Fee Required**

6. Name and Address of Current Registered Agent

**CARDONA, LANNIE D  
620 N. HATAWAY AVE  
BRONSON, FL 32621**

7. Name and Address of New Registered Agent

Name **Donna J. Creamer**

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

**4859 NW 50th Ave.**

City **Bell**

**FL**

Zip Code **32619**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Donna J. Creamer - Donna J. Creamer - Administrative Director 3-21-06  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25  
Due by May 1, 2006

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **C** ☐ Delete  
NAME **MCQUEEN, CAROL**  
STREET ADDRESS **17651 NW 90TH COURT**  
CITY-ST-ZIP **FANNING SPRINGS, FL 32693**

TITLE **VC** ☐ Delete  
NAME **GLUCKMAN, MARK**  
STREET ADDRESS **3829 RODEO RD**  
CITY-ST-ZIP **BELL, FL 32619**

TITLE **D** ☐ Delete  
NAME **DIGGERS, JOHN COMM**  
STREET ADDRESS **401 NE CEDAR STREET**  
CITY-ST-ZIP **CROSS CITY, FL 32628**

TITLE **D** ☐ Delete  
NAME **TYRE, RALPH**  
STREET ADDRESS **US 19-98 & CR 349**  
CITY-ST-ZIP **OLD TOWN, FL 32680**

TITLE **D** ☒ Delete  
NAME **CROWN, MARY ANN**  
STREET ADDRESS **96 MULLET ROAD**  
CITY-ST-ZIP **SUWANNEE, FL 32692**

TITLE **D** ☐ Delete  
NAME **HURD, STEPHEN J**  
STREET ADDRESS **114 SW 248TH AVE**  
CITY-ST-ZIP **STEINHATCHEE, FL 32359**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☒ Change ☐ Addition  
NAME **MCQUEEN, CAROL**  
STREET ADDRESS **17651 NW 90th Court**  
CITY-ST-ZIP **Fanning Springs, FL 32693**

TITLE **D** ☒ Change ☐ Addition  
NAME **Gluckman, Mark**  
STREET ADDRESS **3829 Rodeo Rd**  
CITY-ST-ZIP **Bell FL 32619**

TITLE **VC** ☐ Change ☒ Addition  
NAME **Gentry, Mitchell**  
STREET ADDRESS **4859 S.W. 86th Ave**  
CITY-ST-ZIP **Bell, FL 32619**

TITLE **C** ☒ Change ☐ Addition  
NAME **TYRE, RALPH**  
STREET ADDRESS **US 19-98 + CR 349**  
CITY-ST-ZIP **Old Town, FL 32680**

TITLE **D** ☐ Change ☒ Addition  
NAME **Kroll, STEVE**  
STREET ADDRESS **P.O. Box 752**  
CITY-ST-ZIP **Steinhatchee, FL 32359**

TITLE **S** ☒ Change ☐ Addition  
NAME **ZETTLER, PETER**  
STREET ADDRESS **P.O. Box 457**  
CITY-ST-ZIP **Williston, FL 32696**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Ralph C Tyre Chair  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/31/06  
Date

352/542/7816  
Daytime Phone #

ATTACHMENT

ATTACHMENT

50008827

FEI Number: 59-3731924

Document # N01000005348

DIXIE, GILCHRIST, LEVY TOURISM DEVELOPMENT BOARD, INC

D

Nennstiel, Gerry  
27885 SE 19 Hwy  
Old Town, FL 32680

D

DeWeese, Debbie  
PO Box 1465  
Old Town, FL 32680

Addition

D

Harrison, Julie  
c/o Hart Springs Park  
4240 SW 86<sup>th</sup> Ave  
Bell, FL 32619

D

Eady, Verna Mae  
16731 NW Hwy 19  
Trenton, FL 32693

D

Lohde, John  
7151 NW 90<sup>th</sup> Street  
Chiefland, FL 32626

D

Brown, Chris  
9050 NW 127<sup>th</sup> Place  
Chiefland, FL 32626

Change

Lilly W. Rooks  
6530 SW State Rd. 24  
Cedar Key, FL 32625

Delete

Lois Fletcher  
P.O. Box 962  
Bell, FL 32619

Delete