


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2007 8:00 am
Secretary of State

01-25-2007 90042 006 ****61.25

DOCUMENT # N01000005348					
1. Entity Name DIXIE, GILCHRIST, LEVY TOURIST DEVELOPMENT BOARD, INC.					
Principal Place of Business 220 SOUTH MAIN ST TRENTON, FL 32693			Mailing Address PO BOX 214 TRENTON, FL 32693		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-3731924	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CREAMER, DONNA J 4859 NW 50TH AVE BELL, FL 32619			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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE D NAME MCQUEEN, CAROL STREET ADDRESS 17651 NW 90TH COURT CITY-ST-ZIP FANNING SPRINGS, FL 32693	<input type="checkbox"/> Delete		TITLE C NAME Harrison, D. Ray STREET ADDRESS 4599 SW 90th Ct. CITY-ST-ZIP Bell, FL 32619	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE D NAME GLUCKMAN, MARK STREET ADDRESS 3829 RODEO RD CITY-ST-ZIP BELL, FL 32619	<input type="checkbox"/> Delete		TITLE C NAME Tyre, Ralph STREET ADDRESS US 19-98 + CR 349 CITY-ST-ZIP Old Town, FL 32680	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE D NAME DIGGERS, JOHN COMM STREET ADDRESS 401 NE CEDAR STREET CITY-ST-ZIP CROSS CITY, FL 32628	<input checked="" type="checkbox"/> Delete		TITLE D NAME Johnson, Troy STREET ADDRESS P.O. Box 1895 CITY-ST-ZIP Cross City, FL 32628	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE D NAME TYRE, RALPH STREET ADDRESS US 19-98 & CR 349 CITY-ST-ZIP OLD TOWN, FL 32680	<input type="checkbox"/> Delete		TITLE D NAME Zettler, Peter STREET ADDRESS P.O. Box 457 CITY-ST-ZIP Williston, FL 32696	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE D NAME KROLL, STEVEN STREET ADDRESS PO BOX 752 CITY-ST-ZIP STEINHATCHEE, FL 32359	<input checked="" type="checkbox"/> Delete				
TITLE S NAME ZETTLER, PETER STREET ADDRESS PO BOX 457 CITY-ST-ZIP WILLISTON, FL 32696	<input type="checkbox"/> Delete				
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: <u>Ralph C. Tyre</u> <u>Chair</u>			1-22-07 352-542-7816		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		

Document # **N01000005348**

ATTACHMENT

60006771

FEI Number: 59-3731924

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

D

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

D

Hurd, Stephen
1114 S.W. 248th Ave.
Steinhatchee, FL 32359

T/S

Harrison, Julie
4240 S.W. 86th Ave.
Bell, FL 32619

Change

VC

Lohde, John
7151 N.W. 90th Street
Chiefland, FL 32626

Change

D

Brown, Chris
9050 NW 127th Place
Chiefland, FL 32626

D

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

Addition

D

Kilborn, Bill.
P.O. Box 1893
Trenton, FL 32693

Addition

Gentry, Mitchell
4959 S.W. 86th Ave.
Bell, FL 32619

Delete