
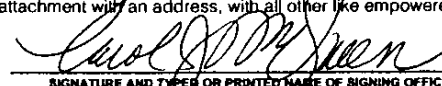


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2008 8:00 am
Secretary of State

01-17-2008 90028 010 ****70.00

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			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CREAMER, DONNA J 4859 NW 50TH AVE BELL, FL 32619			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2008		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	<input type="checkbox"/> Delete	TITLE	T/S <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MCQUEEN, CAROL		NAME	MCQUEEN, CAROL	
STREET ADDRESS	17651 NW 90TH COURT		STREET ADDRESS	9207 Florida Street	
CITY-ST-ZIP	FANNING SPRINGS, FL 32693		CITY-ST-ZIP	Fanning Springs, FL 32693	
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	GLUCKMAN, MARK		NAME		
STREET ADDRESS	3829 RODEO RD		STREET ADDRESS		
CITY-ST-ZIP	BELL, FL 32619		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HARRISON, RAY D		NAME		
STREET ADDRESS	4599 SW 90TH CT		STREET ADDRESS		
CITY-ST-ZIP	BELL, FL 32619		CITY-ST-ZIP		
TITLE	C	<input type="checkbox"/> Delete	TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	TYRE, RALPH		NAME	TYRE, RALPH	
STREET ADDRESS	US 19-98 & CR 349		STREET ADDRESS	3554 S.E. HWY 55-A	
CITY-ST-ZIP	OLD TOWN, FL 32680		CITY-ST-ZIP	Old Town, FL 32680	
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	JOHNSON, TROY		NAME		
STREET ADDRESS	P.O. BOX 1895		STREET ADDRESS		
CITY-ST-ZIP	OLD TOWN, FL 32680		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	C <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ZETTLER, PETER		NAME	HARRISON, JULIE	
STREET ADDRESS	PO BOX 457		STREET ADDRESS	4240 S.W. 86TH AVE.	
CITY-ST-ZIP	WILLISTON, FL 32696		CITY-ST-ZIP	Bell, FL 32619	
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: 			Date: 1/16/2008		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Daytime Phone #</small>		



01152008 Chg-NP CR2E037 (12/06)

4. FEI Number
59-3731924

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

FL Zip Code

352
486-3396