


FILE NOW: FILING FEE IS \$61.25

FILED

May 07 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS																																																																																																																									
DOCUMENT # N02082 (8) 1. Corporation Name THE SEMINOLES OF CRYSTAL RIVER, INC.																																																																																																																											
Principal Place of Business 135 NE 3RD ST CRYSTAL RIVER FL 34429 US		Mailing Address 126 NE 2ND ST CRYSTAL RIVER FL 34429-4114 US PO Box 2415 CRYSTAL RIVER, FL 34423																																																																																																																									
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 PO Box 2415 27 Suite, Apt. #, etc. 28 City & State CRYSTAL RIVER, FL 29 Zip Country 34423 CITRUS 30																																																																																																																									
9. Name and Address of Current Registered Agent REHM, GEORGE 126 NE 2ND ST CRYSTAL RIVER FL 34429		10. Name and Address of New Registered Agent 81 Name EMORY JUDY 82 Street Address (P.O. Box Number is Not Acceptable) 300 SE PARADISE PT RD 83 84 City CRYSTAL RIVER FL 85 Zip Code 34429																																																																																																																									
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE <i>Emory Judy</i> Emory Judy / Treasurer 4/23/97 <small>Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reappointing)</small>																																																																																																																											
12. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:10%;">P</td> <td style="width:10%; text-align: right;"><input type="checkbox"/> DELETE</td> <td style="width:70%;">NAME STREET ADDRESS CITY - ST - ZIP</td> </tr> <tr> <td></td> <td>SCHNEIDERREIT, BRENDA</td> <td></td> <td>236 NE 3RD ST CRYSTAL RIVER FL</td> </tr> <tr> <td></td> <td>VP</td> <td style="text-align: right;"><input type="checkbox"/> DELETE</td> <td>NAME STREET ADDRESS CITY - ST - ZIP</td> </tr> <tr> <td></td> <td>HOLT, GEORGE</td> <td></td> <td>1208 N. MERLIN TERR. 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14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address. SIGNATURE: <i>J. George Rehm</i> J. George Rehm 4/23/97 (352) 795-5689																																																																																																																											



CR2E037 (9/96)