

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N49758

1. Entity Name

CEDAR KEY STATE MUSEUM AND ST. CLAIR WHITMAN
CITIZEN SUPPORT ORGANIZATION, INC.



Principal Place of Business

12231 S.W. 166 COURT
CEDAR KEY, FL 32625

Mailing Address

P.O. BOX 462
CEDAR KEY, FL 32625

DO NOT WRITE IN THIS SPACE

01262008 No Chg-NP

CR2E037 (4/06)

4. FEI Number

59-3145772

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PROBST, KAY
12691 MERLE AVE.
CEDAR KEY, FL 32625

**DO NOT WRITE
IN THIS SPACE**

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

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, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE V
NAME EHRBAR, ELIZABETH
STREET ADDRESS 1165 WIDDEN AVE.
CITY-ST-ZIP CEDAR KEY, FL 32625

TITLE P
NAME PROBST, KAY
STREET ADDRESS 12691 MERLE AVE
CITY-ST-ZIP CEDAR KEY, FL 32625

TITLE D
NAME GRIFFIS, ELIZABETH
STREET ADDRESS 705 NW 40TH TERRACE
CITY-ST-ZIP GAINESVILLE, FL 32607

TITLE T
NAME STARNES, DORTHY
STREET ADDRESS P.O. BOX 234
CITY-ST-ZIP CEDAR KEY, FL 32625

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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:

Kay Probst

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/24/08

Date

352 543-5350

Daytime Phone #



Florida Department of Environmental Protection

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

Charlie Crist
Governor

Jeff Kottkamp
Lt. Governor

Michael W. Sole
Secretary

March 20, 2008

Mr. Sean Toner
Division of Corporations
Florida Department of State
P.O. Box 6327
Tallahassee, Florida 32314

Dear Mr. Toner:

This letter is to certify that The Cedar Key State Museum and St. Clair Whitman Citizen Support Organization, Inc is a duly authorized citizen support organization under contract to provide support for the Division of Recreation and Parks in accordance with Section 258.015, F.S. Pursuant to Section 617.0122, F.S., this filing is exempt from any fees when certified by this department.

Please call Mary Hanley at 245-3081 if additional information is needed.

Sincerely,

Mike Bullock
Director
Florida Park Service

MB/mh

Enclosure