

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 17, 2002 8:00 am
Secretary of State

04-17-2002 90089 032 ****61.25

DOCUMENT # N98000004567

1. Entity Name

CITRUS COUNTY ECONOMIC DEVELOPMENT COUNCIL, INC.

Principal Place of Business

28 NW HWY 19
CRYSTAL RIVER FL 34428
US

Mailing Address

28 NW HWY 19
CRYSTAL RIVER FL 34428
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SULLIVAN, BILL
28 NW HWY 19
CRYSTAL RIVER FL 34428

7. Name and Address of New Registered Agent

Name Paul Danner

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

28 N. W. Hwy 19

City Crystal River FL Zip Code 34428

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE VD ☐ Delete
NAME CLARK, FRED
STREET ADDRESS 3465 W. SUSAN LANE
CITY-ST-ZIP LECANTO FL 34461

TITLE PD ☐ Delete
NAME SULLIVAN, BILL
STREET ADDRESS 15 BUMELIA CRT
CITY-ST-ZIP HOMOSASSA FL 34446

TITLE PED ☐ Delete
NAME DANNER, PAUL
STREET ADDRESS 800 W. MAIN ST
CITY-ST-ZIP INVERNESS FL 34451

TITLE TD ☐ Delete
NAME SHULTZ, BRUCE
STREET ADDRESS 1502 SE HWY 19
CITY-ST-ZIP CRYSTAL RIVER FL 34429

TITLE SD ☐ Delete
NAME HARVEY, JAMES
STREET ADDRESS 3800 S RECANTO HWY
CITY-ST-ZIP LECANTO FL 34461

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VD ☐ Change ☒ Addition
NAME Jacquie Hepfer
STREET ADDRESS 108 Seminole Ave
CITY-ST-ZIP Inverness, FL 34450

TITLE PED ☒ Change ☐ Addition
NAME JAMES HARVEY
STREET ADDRESS 3800 S Lecanto Hwy
CITY-ST-ZIP Lecanto FL 34461

TITLE PD ☒ Change ☐ Addition
NAME Paul Danner
STREET ADDRESS 800 W. Main St.
CITY-ST-ZIP Inverness, FL 34451

TITLE Same ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☒ Change ☒ Addition
NAME Kathleen Small
STREET ADDRESS 4121 St. Lawrence Dr.
CITY-ST-ZIP New Port Richey, FL 34653

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)