

ORDINANCE NO. 2007- 01

AN ORDINANCE OF THE BOARD OF COUNTY COMMISSIONERS OF NASSAU COUNTY, FLORIDA, RESCINDING ORDINANCE NO. 2005-48, WHICH, PURSUANT TO FLORIDA STATUTES, SECTION 336.025(1)(b), IMPOSED A FIVE-CENT LOCAL OPTION FUEL TAX; PROVIDING AN EFFECTIVE DATE.


WHEREAS, it has been determined by the Board of County Commissioners that it is not in the best interest of the citizens of Nassau County to continue to impose a five-cent local option fuel tax beyond the legally required calendar year of 2007.

NOW, THEREFORE, BE IT ORDAINED this 8th day of January, 2007, by the Board of County Commissioners of Nassau County, Florida, as follows:

1. Ordinance No. 2005-48, adopted on June 13, 2005, is hereby rescinded.
2. Collections of the five-cent local option fuel tax will, by law, cease effective December 31, 2007.
3. A certified copy of this Ordinance shall be provided to the Florida Department of Revenue by certified mail.
4. This recession, shall, by law, become effective on December 31, 2007 and upon receipt of an official acknowledgement from the Florida Secretary of State's Office that a certified copy of this Ordinance has been filed with

that a certified copy of this Ordinance has been filed with his/her office.

BOARD OF COUNTY COMMISSIONERS
NASSAU COUNTY, FLORIDA



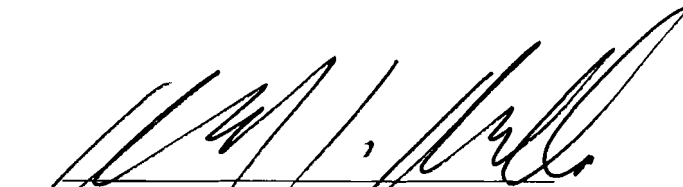
JIM B. HIGGINBOTHAM
Its: Chairman

ATTEST as to Chairman's
Signature:



JOHN A. CRAWFORD
Its: Ex-Officio Clerk

Approved as to form by the
Nassau County Attorney:



MICHAEL S. MULLIN



NASSAU COUNTY
BOARD OF COUNTY COMMISSIONERS
P.O. Box 1010
Fernandina Beach, Florida 32035-1010

Jim B. Higginbotham Dist. No. 1 Fernandina Beach
Michael H. Boyle Dist. No. 2 Fernandina Beach
Tom Branan Dist. No. 3 Yulee
Barry Holloway Dist. No. 4 Hilliard
Marianne Marshall Dist. No. 5 Callahan

JOHN A. CRAWFORD
Ex-Officio Clerk

MICHAEL S. MULLIN
County Attorney

VIA CERTIFIED MAIL

MIKE MAHANEY
County Administrator

January 23, 2007

Ms. Cleo Horne, Town Clerk
Town of Callahan
Post Office Box 5016
Callahan, FL 32011

RE: Five Cent Local Option Fuel Tax

Dear Ms. Horne:

Enclosed please find a certified copy of Ordinance No. 2007-01, adopted by the Board in Regular Session of January 8, 2007. This Ordinance rescinds Ordinance No. 2005-48, which imposed a five-cent local option fuel tax. The effective date of Ordinance No. 2007-01 is December 31, 2007.

For your information, I am providing the 2007 calendar year schedule for State monthly remittances of 5-Cent gas tax revenues to the local governments which are as follows:

2007 January Dealer Collection of gas taxes will be remitted in March 2007

2007 February Dealer Collection of gas taxes will be remitted in April 2007

2007 March Dealer Collection of gas taxes will be remitted in May 2007

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2007 September Dealer Collection of gas taxes will be remitted in November 2007

2007 October Dealer Collection of gas taxes will be remitted in December 2007

2007 November Dealer Collection of gas taxes will be remitted in January 2008

(904) 548-4660, 879-1029, (800) 958-3496


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Ms. Cleo Horne
January 23, 2007
Page Two

2007 December Dealer Collection of gas taxes will be remitted in February 2008

If I may be of any further assistance, please do not hesitate to contact me.

Sincerely yours,



John A. Crawford
Ex-Officio Clerk

Enclosure
JAC:jb

CC: Honorable Shirley Graham, Mayor
Gene Knaga, Deputy Comptroller
Chris Lacambra, Assistant Deputy Comptroller

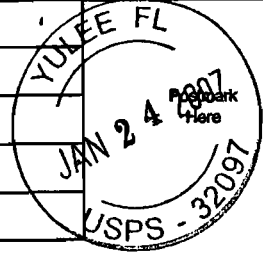
7004 1160 0000 5637 5650

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Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



Sent To **Cleo Horne, Town Clerk, Callahan**
 Street, Apt. No., or PO Box No. **Post Office Box 5016**
 City, State, ZIP+4 **Callahan, FL 32011**

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cleo Horne, Town Clerk
 Town of Callahan
 Post Office Box 5016
 Callahan, FL 32011

2. Article Number
 (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature Signature Agent Addressee

B. Received by (Printed Name) **CARIE HORN**

C. Date of Delivery **1/25/07**

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type

Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

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NASSAU COUNTY
BOARD OF COUNTY COMMISSIONERS
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Fernandina Beach, Florida 32035-1010

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Tom Branan
Barry Holloway
Marianne Marshall

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Dist. No. 2 Fernandina Beach
Dist. No. 3 Yulee
Dist. No. 4 Hilliard
Dist. No. 5 Callahan

JOHN A. CRAWFORD
Ex-Officio Clerk

MICHAEL S. MULLIN
County Attorney

MIKE MAHANEY
County Administrator

VIA CERTIFIED MAIL

January 23, 2007

Ms. Lisa Purvis, Town Clerk
Town of Hilliard
Post Office Box 249
Hilliard, FL 32046

RE: Five Cent Local Option Fuel Tax

Dear Ms. Purvis:

Enclosed please find a certified copy of Ordinance No. 2007-01, adopted by the Board in Regular Session of January 8, 2007. This Ordinance rescinds Ordinance No. 2005-48, which imposed a five-cent local option fuel tax. The effective date of Ordinance No. 2007-01 is December 31, 2007.

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(904) 548- 4660, 879-1029, (800) 958- 3496

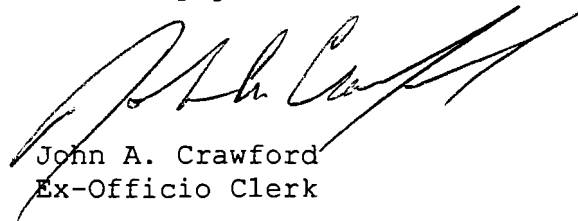
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Ms. Lisa Purvis
January 23, 2007
Page Two

2007 December Dealer Collection of gas taxes will be remitted in February 2008

If I may be of any further assistance, please do not hesitate to contact me.

Sincerely yours,



John A. Crawford
Ex-Officio Clerk

Enclosure
JAC:jb

CC: Honorable David Buchanan, Mayor
Gene Knaga, Deputy Comptroller
Chris Lacambra, Assistant Deputy Comptroller

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature X <i>Marya Cochran</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>HILLIARD</u> Date of Delivery _____</p>
<p>1. Article Addressed to:</p> <p>Ms. Lisa Purvis Town Clerk Town of Hilliard Post Office Box 249 Hilliard, FL 32046</p>	<p>D. Is delivery address different from item 1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below: _____</p> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) _____</p>	<p>7004 1160 0000 5637 5636</p>

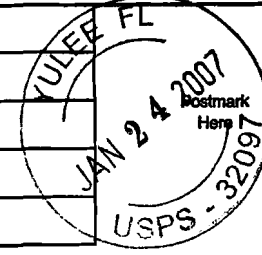
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Postage	\$ _____
Certified Fee	_____
Return Receipt Fee (Endorsement Required)	_____
Restricted Delivery Fee (Endorsement Required)	_____
Total Postage & Fees	\$ _____



Sent To	Lisa Purvis, Town of Hilliard
Street, Apt. No., or PO Box No.	Post Office Box 249
City, State, ZIP+4	Hilliard, FL 32046

PS Form 3800, June 2002 See Reverse for Instructions

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NASSAU COUNTY
BOARD OF COUNTY COMMISSIONERS
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Tom Branan
Barry Holloway
Marianne Marshall

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Dist. No. 2 Fernandina Beach
Dist. No. 3 Yulee
Dist. No. 4 Hilliard
Dist. No. 5 Callahan

JOHN A. CRAWFORD
Ex-Officio Clerk

MICHAEL S. MULLIN
County Attorney

MIKE MAHANEY
County Administrator

VIA CERTIFIED MAIL

January 23, 2007

Mr. Michael Czymbor, City Manager
City of Fernandina Beach
204 Ash Street
Fernandina Beach, FL 32034

RE: Five Cent Local Option Fuel Tax

Dear Mr. Czymbor:

Enclosed please find a certified copy of Ordinance No. 2007-01, adopted by the Board in Regular Session of January 8, 2007. This Ordinance rescinds Ordinance No. 2005-48, which imposed a five-cent local option fuel tax. The effective date of Ordinance No. 2007-01 is December 31, 2007.

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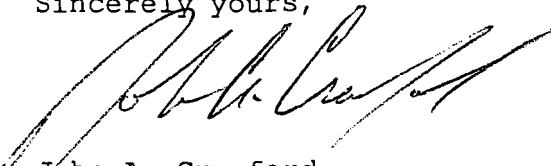
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Mr. Michael Cymbor
January 23, 2007
Page Two

2007 December Dealer Collection of gas taxes will be remitted in February 2008

If I may be of any further assistance, please do not
hesitate to contact me.

Sincerely yours,



John A. Crawford
Ex-Officio Clerk

JAC:jb

CC: Honorable Bill Leeper, Mayor
Gene Knaga, Deputy Comptroller
Chris Lacambra, Assistant Deputy Comptroller

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <i>[Signature]</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>AL ROSS</i> C. Date of Delivery <i>1-25-07</i></p>
<p>1. Article Addressed to:</p> <p>Michael Czymbor City Manager City of Fernandina Beach 204 Ash Street Fernandina Beach, FL32034</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p>	<p>7004 1160 0000 5637 5643</p>

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7004 1160 0000 5637 5643

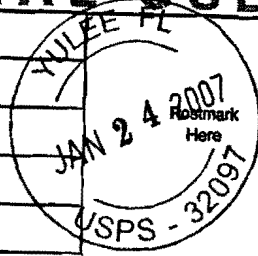
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Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



Sent To **Michael Czymbor, City of Fdna Bch**
 Street, Apt. No., or PO Box No. **204 Ash Street**
 City, State, ZIP+4[®] **Fernandina Beach, FL 32034**

PS Form 3800, June 2002 See Reverse for Instructions



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BOARD OF COUNTY COMMISSIONERS
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Fernandina Beach, Florida 32035-1010

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Dist. No. 4 Hilliard
Dist. No. 5 Callahan

JOHN A. CRAWFORD
Ex-Officio Clerk

MICHAEL S. MULLIN
County Attorney

MIKE MAHANEY
County Administrator

VIA CERTIFIED MAIL

January 23, 2007

Ms. Wynette Rogers
Florida Department of Revenue
5050 West Tennessee Street
Tallahassee, FL 32399-0100

RE: Five Cent Local Option Fuel Tax

Dear Ms. Rogers:

Enclosed please find a certified copy of Ordinance No. 2007-01, adopted by the Board in Regular Session of January 8, 2007. This Ordinance rescinds Ordinance No. 2005-48, which imposed a five-cent local option fuel tax. The effective date of Ordinance No. 2007-01 is December 31, 2007.

If I may be of any further assistance, please do not hesitate to contact me.

Sincerely yours,

John A. Crawford
Ex-Officio Clerk

JAC:jb

Enclosure

CC: Gene Knaga, Deputy Comptroller
Chris Lacambra, Assistant Deputy Comptroller

(904) 548- 4660, 879-1029, (800) 958- 3496

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SENDER: COMPLETE THIS SECTION

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- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece or on the front if space permits.

1. Article Addressed to:

Wynette Rogers
 Department of Revenue
 5050 West Tennessee Street
 Tallahassee, FL 32399-0100

2. Article Number

(Transfer from service label)

7004 1160 0000 5637 5667

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature] Agent
[Signature] Addressee

Received by (Printed Name) **00 00** Date of Delivery

0004635279 JAN 30 2007

Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

3. Service Type

- Certified Mail Express Mail
- Registered Return Receipt for Merchandise
- Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

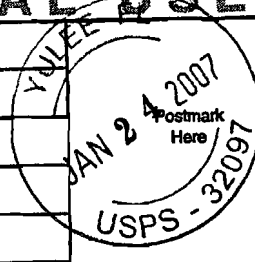
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Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



Sent To Wynette Rogers, Dept. of Revenue

Street, Apt. No.;
 or PO Box No. 5050 W. Tennessee St.

City, State, ZIP+4
 Tallahassee, FL 32399-0100

PS Form 3800, June 2002

See Reverse for Instructions