



**1424 N GULF AVENUE  
CRYSTAL RIVER, FL 34429**

**FOR SALE AT: \$ 1,290,000**

- CCPA Alt Key # 1112436
- Lot Size: 2.21 Acres
- Zoning: GNC
- Frontage on N Gulf Avenue
- Income Producing



C. Sandon Wiechens, CCIM, SIOR  
Broker: Wiechens Realty, Inc.  
M: (352) 817-6474 O: (352) 622-3214  
sandon@wiechensrealty.com



# Property Synopsis

Now available for sale, this expansive 2.21-acre commercial property presents an exceptional opportunity in the heart of fast-growing Crystal River, FL. Offering a highly functional layout with excellent visibility and 16,606 total square feet across three buildings, the site is zoned GNC (General Neighborhood Commercial) under the Citrus County Land Development Code, making it suitable for a wide variety of commercial uses. The main building features two storefront office units, each approximately 32 x 20 feet, along with a 6,000 SF warehouse unit that includes four roll-up doors, additional office space, and two bathrooms. Two additional buildings are configured as storage facilities totaling 42 units. This includes 18 units that are 10 x 25 feet each and 24 units that are 10 x 20 feet each.

To provide the next owner with a premier investment foundation, the facility has been strategically transitioning towards growing an improved tenant base at current market rates. This proactive management approach offers a streamlined start, allowing you to immediately capitalize on a stabilized, growth-oriented asset. This turnkey operation includes handover of the [gulfstatestorage.com](http://gulfstatestorage.com) website and a newly implemented automated management program for seamless ACH and credit card rent collection.

Recent capital improvements include the installation of a newly fenced perimeter encompassing the entire property, providing enhanced security not yet reflected in current photography. With extremely low overhead, this asset is primed for high-margin returns. Whether you're an investor seeking steady rental income or a business owner in need of workspace with revenue-generating options, this property offers the versatility and location to meet your needs.



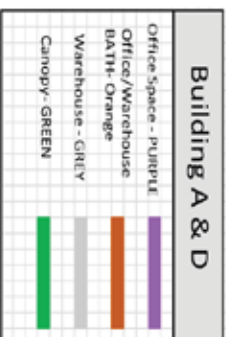
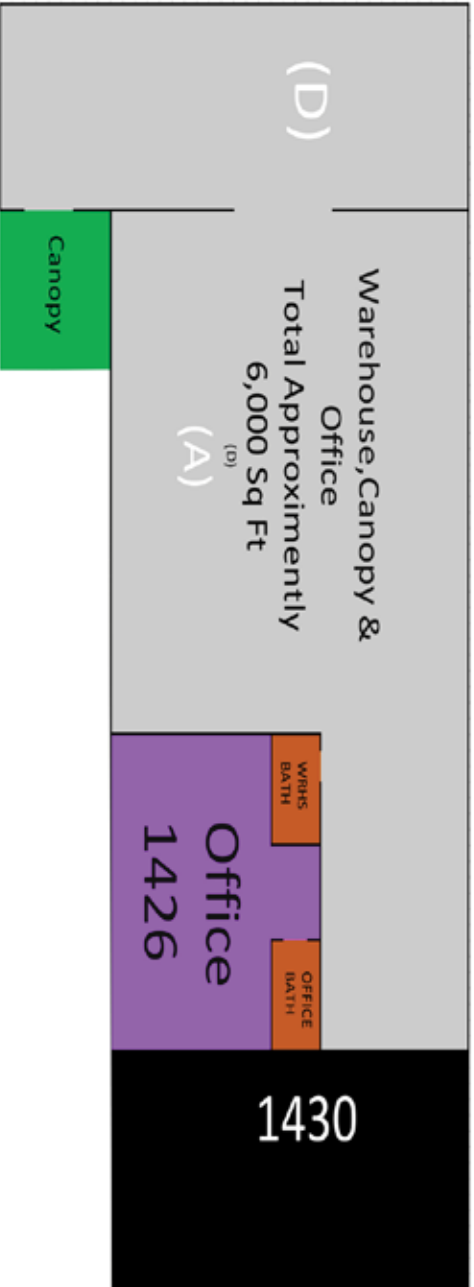
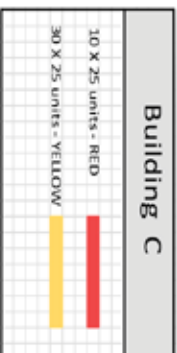
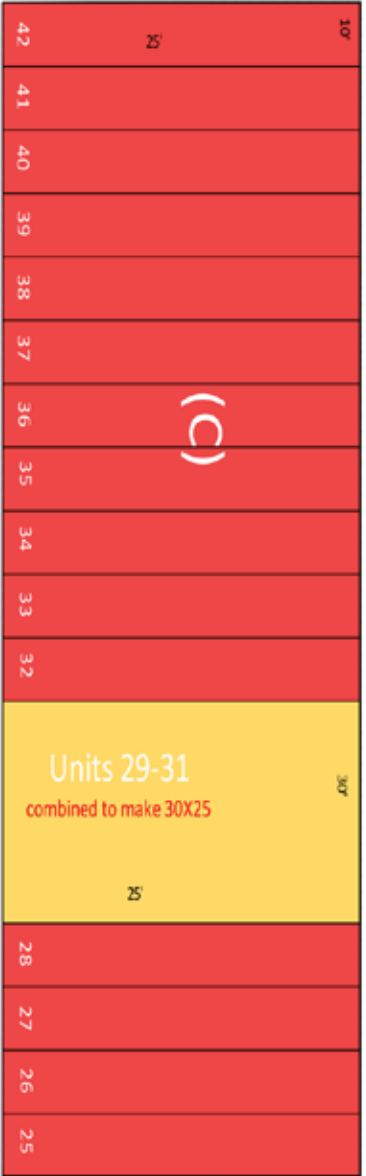
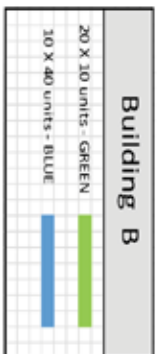
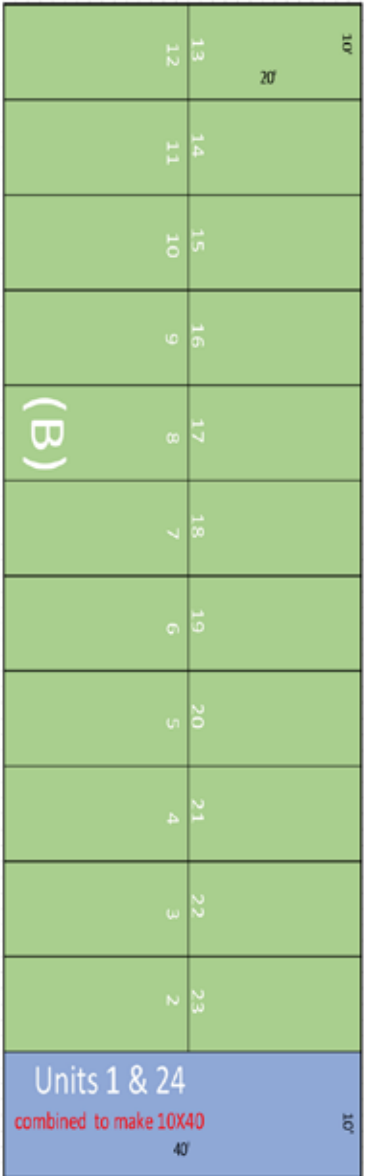
---

## Highlights

- CCPA Alt Key # 1112436
- Lot Size: 2.21 Acres
- Zoning: GNC
- Location: frontage on N Gulf Avenue
- Excellent location in busy area
- Large signage is available
- Great for Owner/User + Income Producing
- Also great layout for fully Income Producing
- (2) 32 x 20 storefront units
- Large warehouse / office @ 6,000 SF
- (18) 10 x 25 and (24) 10 x 20 storage units



# BUILDING DIAGRAM (NOT TO SCALE)





**ALT KEY # 1112435**

---

Situs Address:  
1424 North Gulf Avenue  
Crystal River, FL 34429

**CCPA  
AERIAL**

Legal Description per the Citrus County  
Property Appraiser:

MAYFAIR GARDEN ACRES PB 2 PG 142  
LOT 1 BLK I

PROPERTY PHOTOS



# PROPERTY PHOTOS





1:38 PM  
05/11/26

**Gulf State Storage LLC**  
**Customer Contact List**  
May 11, 2026

Customer	Rent
1/24- LEASED	\$165
2- Vacant	
3- Vacant	
4- Vacant	
5- LEASED	\$165
6- LEASED	\$165
7- Vacant	
8- Vacant	
9- Vacant	
10- Vacant	
11- LEASED	\$85
12- LEASED	\$85
13- Vacant	
1428- LEASED	\$750
15- LEASED	\$85 ea.
16- Vacant	
17- LEASED	\$165
18- LEASED	\$85
19- LEASED	\$165
20- Vacant	
21- Vacant	
22- LEASED	\$165
23- Vacant	
25-27 LEASED	\$375
28- LEASED	\$175
29- Vacant	
30- Vacant	
31- Vacant	
32- Vacant	
33- Locked Out	
34- Vacant	
35- Vacant	
36- LEASED	\$175
37- LEASED	\$140
38- LEASED	\$1680 (Annual)
39- Vacant	
40- LEASED	\$175
41- LEASED	\$175
42- LEASED	\$140
LEASED	\$3500

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name GM1 PARTNERSHIP d/b/a GULF STORAGE	For Insurance Company Use: Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1424 N. GULF AVENUE BUILDING A City CRYSTAL RIVER State FL ZIP Code 34429	Company NAIC Number
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 1, BLOCK I, MAYFAIR GARDEN ACRES	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>NON-RESIDENTIAL</u>	
A5. Latitude/Longitude: Lat. <u>28 52 58</u> Long. <u>82 32 36</u>	Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.	
A7. Building Diagram Number <u>1</u>	
A8. For a building with a crawl space or enclosure(s), provide a) Square footage of crawl space or enclosure(s) <u>N/A</u> sq ft b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade <u>N/A</u> c) Total net area of flood openings in A8.b <u>N/A</u> sq in	A9. For a building with an attached garage, provide: a) Square footage of attached garage <u>N/A</u> sq ft b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade <u>N/A</u> c) Total net area of flood openings in A9.b <u>N/A</u> sq in

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number UNINCORPORATED 120063		B2. County Name CITRUS		B3. State FL	
B4. Map/Panel Number 120063 0120	B5. Suffix B	B6. FIRM Index Date 11/6/1998	B7. FIRM Panel Effective/Revised Date 8/15/84	B8. Flood Zone(s) C & A	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) N/A & 11.00' (SEE NOTE)
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

## SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on:  Construction Drawings\*  Building Under Construction\*  Finished Construction  
\*A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations – Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-g below according to the building diagram specified in Item A7.  
Benchmark Utilized FDOT BM 18 Vertical Datum NGVD29  
Conversion/Comments \_\_\_\_\_

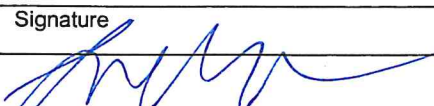
Check the measurement used.

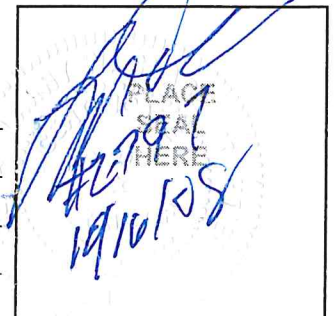
a) Top of bottom floor (including basement, crawl space, or enclosure floor)	<u>14.5</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	<u>N.A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N.A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	<u>N.A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments)	<u>N.A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG)	<u>14.2</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG)	<u>14.3</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)

## SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

Check here if comments are provided on back of form.

Certifier's Name LARRY W. CLARK	License Number 2797
Title OWNER	Company Name CLARK SURVEYING, INC.
Address 256 N.E. CRYSTAL STREET	City CRYSTAL RIVER State FL ZIP Code 34428
Signature 	Date 10/16/08 Telephone 352-563-2729



<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>	For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1424 N. GULF AVENUE (BUILDING A)	Policy Number
City CRYSTAL RIVER State FL ZIP Code 34429	Company NAIC Number

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments C2.e = WINDOW UNIT AIR CONDITIONERS; B8 & 9: FLOOD ZONE A; BASE FLOOD ELEVATION BASED ON REVIEW OF USGS QUAD, FEMA PANEL 120063 0120B & ELEVATIONS DETERMINED FOR THIS LOT TO BE 10' MEAN SEA LEVEL; THEREFORE IT WOULD APPEAR 11' SHOULD BE SET AS A BASE FLOOD ELEVATION.

Signature 

Date 10/16/08

Check here if attachments

**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)**

For Zones AO and A (without BFE), complete Items E1-E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

- E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
  - a) Top of bottom floor (including basement, crawl space, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the HAG.
  - b) Top of bottom floor (including basement, crawl space, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the HAG.
- E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is \_\_\_\_\_  feet  meters  above or  below the HAG.
- E3. Attached garage (top of slab) is \_\_\_\_\_  feet  meters  above or  below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_  feet  meters  above or  below the HAG.
- E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?  Yes  No  Unknown. The local official must certify this information in Section G.

**SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION**

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. *The statements in Sections A, B, and E are correct to the best of my knowledge.*

Property Owner's or Owner's Authorized Representative's Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_ Telephone \_\_\_\_\_

Comments \_\_\_\_\_

Check here if attachments

**SECTION G - COMMUNITY INFORMATION (OPTIONAL)**

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8. and G9.

- G1.  The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2.  A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3.  The following information (Items G4.-G9.) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued
-------------------	------------------------	---

G7. This permit has been issued for:  New Construction  Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_  feet  meters (PR) Datum \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_  feet  meters (PR) Datum \_\_\_\_\_

Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_

Check here if attachments

# Building Photographs

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1424 N. GULF AVENUE - BUILDING A	For Insurance Company Use: Policy Number
City CRYSTAL RIVER State FL ZIP Code 34429	Company NAIC Number
<p>If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page, following.</p>	



# Building Photographs

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1424 N. GULF AVENUE BUILDING A	For Insurance Company Use: Policy Number
City CRYSTAL RIVER State FL ZIP Code 34429	Company NAIC Number
If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View."	

