

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S55433

FILED  
Apr 26, 2007  
Secretary of State

Entity Name: CEDAR HOUSE PROPERTIES, INC.

**Current Principal Place of Business:**

125 WASHINGTON STREET  
ST. AUGUSTINE, FL 32084

**New Principal Place of Business:**

**Current Mailing Address:**

125 WASHINGTON STREET  
ST. AUGUSTINE, FL 32084

**New Mailing Address:**

FEI Number: 65-0265735      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

THOMAS, RUSSELL E.  
125 WASHINGTON STREET  
ST. AUGUSTINE, FL 32084      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PT ( ) Delete  
Name: THOMAS, RUSSELL E.,  
Address: 125 WASHINGTON STREET  
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: D ( ) Delete  
Name: MC DONALD, KELLIE L  
Address: 1570 MASTERS DR  
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: VPS ( ) Delete  
Name: THOMAS, ANITA  
Address: 125 WASHINGTON STREET  
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: D ( ) Delete  
Name: THOMAS, RUSSELL E III  
Address: 1122 SO. 15TH STREET  
City-St-Zip: PALATKA, FL 32177

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RUSSELL E. THOMAS

MR.

04/26/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date