2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000060823

City-St-Zip:

THOMASVILLE, GA 31792

Entity Name: CEDAR KEY CLAM COMPANY INC

FILED Feb 16, 2009 Secretary of State

Entity Nai	me: CEDAR	KEY CLAM COMPANY INC.			
Current P	rincipal Plac	e of Business:	New Principal Place o	New Principal Place of Business:	
	ET STREET /ILLE, GA 31 ⁻	792			
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
	ET STREET /ILLE, GA 31	792			
FEI Number:	: 59-3311494	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
CLENDENIN, PATRICK 134 CAMPBELL STREET ORANGE PARK, FL 32073 US			134 CAMPBÉLL AVENI	CLENDENIN, PATRICK 134 CAMPBELL AVENUE ORANGE PARK, FL 32073 US	
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				02/16/2009	
	Electro	nic Signature of Registered Age	ent	Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (CLENDENIN, I 202 WHEET S THOMASVILLE	TREET	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	V (THOMPSON, I 201 CHARNIE THOMAVILLE,	DRIVE	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address:	CLENDENIN, I) Delete ROBERT ON STILL ROAD	Title: (Name: Address:) Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip:

SIGNATURE: PATRICK CLENDENIN P 02/16/2009