# I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered. SIGNATURE: TIMOTHY NASH PRES 04/12/2013

SIGNATURE: TIMOTHY NASH

# 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729733

# Entity Name: THE CEDARS CONDOMINIUM ASSOCIATION, INC.

## **Current Principal Place of Business:**

209 MIRACLE STRIP PARKWAY MARY ESTHER, FL 32569

#### **Current Mailing Address:**

P. O. BOX 22 MARY ESTHER, FL 32569 US

# FEI Number: 59-1612408

## Name and Address of Current Registered Agent:

MOORE, GLYNN F 209 W MIRACLE ST PWY BUSINESS OFFICE MARY ESTHER, FL 32569 US Certificate of Status Desired: No

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.

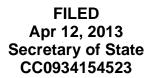
#### SIGNATURE:

Electronic Signature of Registered Agent

#### **Officer/Director Detail :**

Title	VPD	Title	D
Name	CARR, CAMERON	Name	PRITCHARD, DOUG
Address	209 W MIRACLE STRIP PWY BLD	Address	209 W. MIRACLE STRIP PKWY, G304
	G305	City-State-Zip:	MARY ESTHER FL 32569
City-State-Zip:	MARY ESTHER FL 32569		
<b>T</b> '0.		Title	D
Title	PRES	Title Name	D WALTON, MARY
Title Name	PRES NASH, TIMOTHY	Name	WALTON, MARY
		Name Address	WALTON, MARY 209 W. MIRACLE STRIP PKWY, F202
Name	NASH, TIMOTHY	Name	WALTON, MARY

Electronic Signature of Signing Officer/Director Detail



Date

Date