

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 768853

**Entity Name:** CEDAR AVENUE CONDOMINIUM OWNERS' ASSOCIATION, INC.

**FILED**  
**Apr 24, 2015**  
**Secretary of State**  
**CC8974696789**

**Current Principal Place of Business:**

151 MARY ESTHER BLVD.  
SUITE 301  
MARY ESTHER, FL 32569

**Current Mailing Address:**

151 MARY ESTHER BLVD.  
SUITE 301  
MARY ESTHER, FL 32569

**FEI Number: 59-2496558**

**Certificate of Status Desired: No**

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

CRITER, KAREN  
113C CEDAR AVE SW  
FORT WALTON BEACH, FL 32548 US

*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

**Officer/Director Detail :**

Title D  
Name ANGLEA, J.R.  
Address 117-A CEDAR AVE., SW  
City-State-Zip: FT. WALTON BEACH FL 32548

Title PD  
Name DUNAHUGH, PETER  
Address 113 C CEDAR AVE SW  
City-State-Zip: FORT WALTON BCH FL 32548

Title D  
Name CRITER, KAREN  
Address 113C CEDAR AVE SW  
City-State-Zip: FT. WALTON BEACH FL 32548

Title T  
Name RISALVATO, THOMAS J  
Address 151 MARY ESTHER BLVD., SUITE 301  
City-State-Zip: MARY ESTHER FL 32569

*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: THOMAS J RISALVATO**

**TREASURER**

**04/24/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date