

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769193

Entity Name: THE VILLAS OF CEDAR KEY CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**3600 BAL HARBOUR BLVD.
PUNTA GORDA, FL 33950**Current Mailing Address:**PO BOX 380758
MURDOCK, FL 33938-0758 US**FEI Number: 59-2482948****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**THE GATEWAY GROUP
1532 RIO DE JANEIRO AVE
PUNTA GORDA, FL 33983 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	P
Name	GILLEN, PETER
Address	PO BOX 380758
City-State-Zip:	MURDOCK FL 33938-0758

Title	VPD
Name	POMPEO, ROBERT
Address	PO BOX 380758
City-State-Zip:	MURDOCK FL 33938-0758

Title	SD
Name	TAUER, JANET
Address	PO BOX 380758
City-State-Zip:	MURDOCK FL 33938-0758

Title	TD
Name	TOOTHAKER, BOB
Address	PO BOX 380758
City-State-Zip:	MURDOCK FL 33938-0758

Title	D
Name	KOSTER, JERRY
Address	PO BOX 380758
City-State-Zip:	MURDOCK FL 33938-0758

Title	D
Name	ARTHER, DONNA
Address	PO BOX 380758
City-State-Zip:	MURDOCK FL 33938-0758

Title	DIRECTOR
Name	BUCK, DON
Address	PO BOX 380758
City-State-Zip:	MURDOCK FL 33938

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: PETER GILLEN**PRESIDENT****04/15/2013**

Electronic Signature of Signing Officer/Director Detail

Date