

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000002335

Entity Name: CEDAR KEYS AUDUBON INC**Current Principal Place of Business:**BOX 937
1210 HAWTHORNE AVENUE
CEDAR KEY, FL 32625**Current Mailing Address:**P. O. BOX 96
CEDAR KEY, FL 32625**FEI Number:** 81-1780605**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BUSHNELL, JAY
1210 HAWTHORNE AVENUE
BOX 937
CEDAR KEY, FL 32625 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:** JAY BUSHNELL

01/29/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	BUSHNELL, JAY
Address	P. O. BOX 96
City-State-Zip:	CEDAR KEY FL 32625

Title	VP
Name	MAPLE, DOUGLAS L
Address	15624 SUNSET POINT
City-State-Zip:	CEDAR KEY FL 32625

Title	SEC
Name	CAGLE, LIBBY
Address	PO BOX 31
City-State-Zip:	CEDAR KEY FL 32625

Title	TRES
Name	KIMBALL, LINDA
Address	12190 SW 166TH CT
City-State-Zip:	CEDAR KEY FL 32625

Title	COMM
Name	OFFERLE, MANDY (MARY) DR.
Address	12660 HODGSON AVE
City-State-Zip:	CEDAR KEY FL 32625

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: JAY BUSHNELL

PRESIDENT

01/29/2019

Electronic Signature of Signing Officer/Director Detail

Date