2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 519973

Entity Name: CABBAGE KEY, INC.

FILED Jan 30, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

INTERCOASTAL WATERWAY, FL 33945 INTERCOASTAL WATERWAY, FL 33945 US

Current Mailing Address: New Mailing Address:

P.O.BOX 200 P.O. BOX 200

PINELAND, FL 33945 PINELAND, FL 33945 US

FEI Number: 59-1714663 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

METHENY, MARVIN L SCHOENFELD, LOWELL S 1380 ROYAL PÁLM SQUARE BOULEVARD 1470 ROYÁL PALM SQUARE BLVD.

FORT MYERS, FL 33919 FORT MYERS, FL 33919

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: LOWELL S. SCHOENFELD 01/30/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

WELLS JR., ROBERT A. WELLS, ROBERT A JR Name: Name: INTRA-COSTAL MARKER 60 P.O. BOX 200 Address: Address:

City-St-Zip: PINELAND FL City-St-Zip: PINELAND, FL 33945 US

Title: Title: DST () Delete (X) Change () Addition

Name: WELLS.PHYLLIS R., Name: WELLS, PHYLLIS R

P.O. BOX 200 INTRA-COSTAL MARKER 60 Address: Address: PINELAND, FL

PINELAND, FL 33945 US City-St-Zip: City-St-Zip:

Title: Title: () Delete (X) Change () Addition

WELLS, PHYLLIS R., WELLS, KENNETH Name: Name: INTRA-COSTAL MARKER 60 P.O. BOX 200 Address: Address:

City-St-Zip: PINELAND, FL City-St-Zip: PINELAND, FL 33945 US

Title: () Delete Title: () Change (X) Addition

WELLS, ROBERT A III Name: Name: Address: Address: P.O. BOX

City-St-Zip: City-St-Zip: PINELAND, FL 33945 US

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

SIGNATURE: ROBERT A. WELLS, JR. DP 01/30/2007