

**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Mar 19, 2004 8:00 am
Secretary of State

03-19-2004 90036 012 ****61.25

DOCUMENT # 743180

1. Entity Name

CEDARSAND, INC.



Principal Place of Business

12274 1ST STR W
TREASURE ISLD FL 33706
US

Mailing Address

7601 9TH STR NO
#B
ST PETERSBURG FL 33702-5200
US

44060100



MOORE CR2E037 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2053001

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MCLEAN, RICHARD
12274 WEST 1ST STREET
TREASURE ISLAND FL 33706

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE SD Delete
NAME GOULD, BEVERLY
STREET ADDRESS 12274 1ST ST W
CITY-ST-ZIP TREASURE ISLAND FL 33706

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME TYLER, SHIRLEY
STREET ADDRESS 7601 9TH STR NO, STE C
CITY-ST-ZIP ST PETERSBURG FL 33702

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME PD MCLEAN, R
STREET ADDRESS 12274 1ST ST W
CITY-ST-ZIP TREASURE ISLAND, FL00000 33706

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME VD DANNENMILLER, JOANNE
STREET ADDRESS 12274 1ST STREET W
CITY-ST-ZIP TREASURE ISLAND FL 33706

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME D YOUMANS, BETTY
STREET ADDRESS 4659 MIRABELLA COURT
CITY-ST-ZIP ST PETE BEACH FL 33706

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Shirley Tyler Treas*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #