2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 22, 2008 08:00 AN Secretary of State

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CEDARS RECREATIONAL PROPERTIES, INC.



Principal Place of Business

Mailing Address

5100 87TH ST E.

BRADENTON, FL 34211 US

5100 87TH ST E. BRADENTON, FL 34211

US



02082008

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-2695613

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

HOGAN, PATRICK, 5100 87TH ST E. BRADENTON FL 34211

DO NOT WRITE

510.02.11	J., 12 J.Z.		IN THIS SPACE				
	named entity submits this statement for the pions of registered agent.	urpose of changing its registered	office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept		
SIGNATURE_	Signature, typed or printed name of registered agent and title	f applicable (NOTE Registered A	d Agent signature required when reinstating)		DATE		
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			U00000913773 05/08/08-80030-003 150.00		
10.	OFFICERS AND DIREC	CTORS			<u> </u>		
NAME STREET ADDRESS CITY-S1-ZIP	PD HUNT, ROBERT A. 5 5100 87TH ST E. BRADENTON, FL 34211						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VST HOGAN, PATRICK M. 5100 87TH ST E. BRADENTON, FL 34211						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,		(DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN ⁻	THIS SPACE		
TITLE NAME STREET ADDRESS		-			•		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if charged, or on an attachment with an address, with all other like propowered.

SIGNATURE: _

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR