2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2009
Secretary of State

DOCUMENT# L30898

Entity Name: CEDAR KEY MANAGEMENT, INC.

Current Principal Place of Business:

192 2ND ST.
CEDAR KEY, FL 32625

New Principal Place of Business:

Current Mailing Address:

192 2ND ST.
PO BOX 837
CEDAR KEY, FL 32625

New Mailing Address:

FEI Number: 59-2979363 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SALTER,, JAMES
3940 NW 16TH BLVD
GAINESVILLE, FL 32605 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: WHITE, WALTER G.,
Address: 441 PARK BLVD, SOUTH
City-St-Zip: VENICE, FL 34285

Title: D ( ) Delete
Name: WHITE, MARY ANN,
Address: 1957 WALKER AVE
City-St-Zip: COLLEGE PK, GA 30337

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP ( ) Change (X) Addition
Name: TINDALL, RICHARD
Address: 6931 SW 108TH AVE.
City-St-Zip: CEDAR KEY, FL 32625

Title: VP ( ) Change (X) Addition
Name: MAGURAN, MARY E
Address: 13451 SW AIRPORT RD.
City-St-Zip: CEDAR KEY, FL 32625

I hereby certify that the information supplied with this filing does not qualify 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: WALTER G. WHIOTE D 03/09/2009

Electronic Signature of Signing Officer or Director Date