

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02664

FILED
Mar 24, 2009
Secretary of State

Entity Name: CEDAR KEY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

330-340 SO ORLANDO AVE
COCOA BEACH, FL 329311533

New Principal Place of Business:

Current Mailing Address:

CEDAR KEY CONDO ASSOC, INC
PO BOX 321533
COCOA BEACH, FL 329321533 US

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CEDAR KEY CONDO ASSOC, INC
330-SO ORLANDO AVE
3B
COCOA BEACH, FL 32931 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

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: CARPENTER, JOHN
Address: 340 S. ORLANDO AVE 1B
City-St-Zip: COCOA BCH, FL 32931

Title: STD () Delete
Name: ABRAMS, TERRI
Address: 340 S ORLANDO 3B
City-St-Zip: COCOA BCH, FL 32931

Title: PD () Delete
Name: WING, STAN
Address: 340 S ORLANDO 3A
City-St-Zip: COCOA BEACH, FL 32931

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TERRI ABRAMS

STD

03/24/2009

Electronic Signature of Signing Officer or Director

_____ Date