

**2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Aug 06, 2008**  
**Secretary of State**

DOCUMENT# N04089

**Entity Name:** CEDAR KEY OYSTERMEN'S ASSOCIATION, INC.**Current Principal Place of Business:**1133 WHIDDON AVE  
CEDAR KEY, FL 32625**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 73  
CEDAR KEY, FL 32625**New Mailing Address:****FEI Number:** 59-2430993**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**COOKE, RICHARD F  
1133 WHIDDON AVE  
CEDAR KEY, FL 32625 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:** DT ( ) Delete  
**Name:** WARD, TASHEA G  
**Address:** 12390 S.W. 75TH ST.  
**City-St-Zip:** CEDAR KEY, FL 32625**Title:** PD ( ) Delete  
**Name:** COOKE, RICHARD F  
**Address:** 1133 WHIDDON AVE.  
**City-St-Zip:** CEDAR KEY, FL 32625**Title:** SD ( ) Delete  
**Name:** BECKHAM, ANGIE  
**Address:** 8531 S.W. C.R. 347  
**City-St-Zip:** CEDAR KEY, FL 32625**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** VP (X) Change ( ) Addition  
**Name:** BECKHAM, TROY M  
**Address:** 8531 SW COUNTY RD. 347  
**City-St-Zip:** CEDAR KEY, FL 32625**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: ANGIE BECKHAM

SD

08/06/2008

Electronic Signature of Signing Officer or Director

Date