

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04089

FILED
Jan 21, 2009
Secretary of State

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: VP () Delete
Name: BECKHAM, TROY M
Address: 8531 SW COUNTY RD. 347
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: () 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: RICHARD F COOKE

PD

01/21/2009

Electronic Signature of Signing Officer or Director

Date