

**2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Oct 05, 2011**  
**Secretary of State**

DOCUMENT# N95000002496

**Entity Name:** CEDAR LAKES RO ASSOCIATION, INC.**Current Principal Place of Business:**450 MAPLEWOOD BLVD.  
COCOA, FL 32926 US**New Principal Place of Business:****Current Mailing Address:**645 CLASSIC CT  
STE 104  
MELBOURNE, FL 32940 US**New Mailing Address:****FEI Number:** 59-3322570      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**SPACE COAST PROPERTY MANAGEMENT OF BREVARD  
645 CLASSIC CT  
STE 104  
MELBOURNE, FL 32940 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:** DAL  
**Name:** CLAYTON, ROBERT  
**Address:** 4102 Balsa Place  
**City-St-Zip:** COCOA, FL 32926 US**Title:** VP  
**Name:** GIRTON, DOROTHY  
**Address:** 4173 Balsa Place  
**City-St-Zip:** COCOA, FL 32926 US**Title:** TREA  
**Name:** FAWCETT, BART  
**Address:** 4143 Balsa Plave  
**City-St-Zip:** COCOA, FL 32926**Title:** SEC  
**Name:** EMERZIAN, EDNA  
**Address:** 3921 Pepper Place  
**City-St-Zip:** COCOA, FL 32926 US**Title:** PRES  
**Name:** GAUTHIER, BEVERLY  
**Address:** 3970 Gatewood  
**City-St-Zip:** COCOA, FL 32926 US

I hereby 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 all other like empowered.

SIGNATURE: BEVERLY GAUTHIER

PRES

10/05/2011

Electronic Signature of Signing Officer or Director

Date