


**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 17, 2007 08:00 AM**  
**Secretary of State**


**DOCUMENT # N95000004629**

1. Entity Name  
**C.A.U. CEDARS, INC.**



Principal Place of Business <b>CEDARS OF BAYMEADOWS APARTMENTS          9801 BAYMEADOWS DRIVE          JACKSONVILLE, FL US</b>	Mailing Address <b>1090 VERMONT AVENUE, N.W.          SUITE 400          WASHINGTON, DC 20005 US</b>
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**DO NOT WRITE IN THIS SPACE**



01052007 No Chg-NP CR2E037 (4/06)

4. FEI Number <b>52-1949586</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
 1201 HAYS STREET  
 TALLAHASSEE, FL 32301**

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25  
 Due by May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRYANT, JAMES S JR. 600 WHARFSIDE WAY JACKSONVILLE, FL 32207
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MEHRETEAB, GHEBRE S 1090 VERMONT AVENUE, N.W., SUITE 400 WASHINGTON, DC 20005
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DANFORD, JR., RICHARD D 1090 VERMONT AVENUE, NW, SUITE 400 WASHINGTON, DC 20005
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS WIEDORFER, JOSEPH P JR 1090 VERMONT AVENUE, N.W., SUITE 400 WASHINGTON, DC 20005
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DANFORD, RICHARD D JR 233 W. DUVAL STREET, 14TH FLOOR JACKSONVILLE, FL 32256
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVPT GOLLUB, RICHARD A 1090 VERMONT AVE., N.W., SUITE 400 WASHINGTON, DC 20005

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 01/17/07-80072-016 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Joseph P. Wiedorfer **JOSEPH P. WIEDORFER** 1/12/2007 202 789 5300  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #