2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 06, 2005
Secretary of State

DOCUMENT# N99000001585

Entity Name: CEDAR HEIGHTS OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

947 PACIFIC SILVER CT.
FT.WALTON BEACH, FL 32547

New Principal Place of Business:

Current Mailing Address:

947 PACIFIC SILVER CT.
FT.WALTON BEACH, FL 32547

New Mailing Address:

FEI Number: 59-3557742 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SHULAR, KEVIN
947 PACIFIC SILVER CT.
FT.WALTON BEACH, FL 32547 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: PD ( ) Delete
Name: HOLSTON, MARLIESE
Address: 960 PACIFIC SILVER CT.
City-St-Zip: FT.WALTON BEACH, FL 32547

Title: SD ( ) Delete
Name: ASHLEY, VONCILE
Address: 974 PACIFIC SILVER CT.
City-St-Zip: FT.WALTON BEACH, FL 32547

Title: TD ( ) Delete
Name: SHULAR, KEVIN
Address: 947 PACIFIC SILVER CT.
City-St-Zip: FT.WALTON BEACH, FL 32547

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 for the exemption stated in Section 119.07(3)(i), 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: KEVIN SHULAR TD 05/06/2005

Electronic Signature of Signing Officer or Director — Date