2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000125873

Current Principal Place of Rusiness:

Entity Name: THE CEDAR BAY COMPANY, INC.

FILED Apr 27, 2007 Secretary of State

The state of the s	The state of European
371 22ND AVE APALACHICOLA, FL 32320	
Current Mailing Address:	New Mailing Address:

371 22ND AVE P.O. BOX 543

APALACHICOLA, FL 32320 APALACHICOLA, FL 32329

FEI Number: 20-1572636 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BLOODWORTH, MICHAEL J 371 22ND AVE APALACHICOLA, FL 32320 US

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

New Principal Place of Rusiness:

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

APALACHICOLA, FL 32320

Title: () Delete Title: (X) Change () Addition BLOODWORTH, MICHAEL J BLOODWORTH, MICHAEL J Name: Name: 359 22ND STREET 371 22ND STREET Address: Address: City-St-Zip: APALACHICOLA, FL 32320 City-St-Zip: APALACHICOLA, FL 32320

Title: VΡ () Delete Title: () Change () Addition

Name: BLOODWORTH, RONALD M Name: 1109 W. GORRIE DRIVE Address: Address: ST. GEORGE ISLAND, FL 32328 City-St-Zip: City-St-Zip:

Title: Title: () Delete (X) Change () Addition BLOODWORTH, MARCELE B Name: BLOODWORTH, MARCELE B Name: 359 22ND STREET 371 22ND STREET Address: Address:

City-St-Zip: APALACHICOLA, FL 32320 City-St-Zip: Title: MGR () Delete Title: MGR (X) Change () Addition BLOODWORTH, BENJAMIN BLOODWORTH, BENJAMIN Name: Name:

Address: 835 E GORRIE DR Address: 633 E GORRIE DR City-St-Zip: APALACHICOLA, FL 32320 City-St-Zip: ST. GEORGE ISLAND, FL 32328

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL J. BLOODWORTH Ρ 04/27/2007