## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

CITY - ST - 712

SIGNATURE:

## May 02, 2005 8:00 am Secretary of State 05-02-2005 90525 009 \*\*\*150.00 **DOCUMENT # P94000072883** 1. Entity Name CEDAR KEY TAX AND ACCOUNTING SERVICE, INC. Principal Place of Business Mailing Address 50045792 P.O. BOX 46 12421 SR 24 PO BOX 46 CEDAR KEY, FL 32625 CEDAR KEY, FL 32625 03112005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3269682 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent CAUSEY, KATHRYN F DO NOT WRITE 12421 SR 24 CEDAR KEY, FL 32625 IN THIS SPACE 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. Signature, typed or printed name of registered agent and tale if applicable. (NOTE: Registered Agen) signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 'After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10, OFFICERS AND DIRECTORS PTS TITLE CAUSEY, KATHRYN F NAME STREET ADDRESS 12421 SR 24 CITY-ST-ZIP CEDAR KEY, FL 32625 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7P TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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

ECTOR

**FILED**