2006 FOR PROFIT CORPORATION

ANNUAL REPORT FILED DOCUMENT # P94000072883 May 02, 2006 08:00 AN Secretary of State CEDAR KEY TAX AND ACCOUNTING SERVICE, INC. Mailing Address Principal Place of Business 12421 SR 24 P.O. BOX 46 CEDAR KEY, FL 32625 PO BOX 46 CEDAR KEY, FL 32625 US 04232006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3269682 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 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 title if applicable. (NOTE. Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. PTS TITLE CAUSEY, KATHRYN F NAME 12421 SR 24 STREET ADDRESS CITY-ST-ZIP CEDAR KEY, FL 32625 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST ZIP IN THIS SPACE TITLE 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 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 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if

SIGNATURE:

CITY-ST-ZIP