FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

1516 GULF BLVD.

2a. Mailing Address

City & State

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Suite, Apt. #, etc. 12411 GULF

CEDAR KEY FL 32625-4626

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Prace of Business

2. Principal Place of Business

12411 GULF

LANG, GREGORY D 1516 GULF BLVD.

CEDAR KEY FL 32625

Suite Apt # etc.

City & State

1516 GULF BLVD.

US

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CEDAR KEY FL 32625



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000091983 (4)

CEDAR KEY BUILDING & DESIGN, INC.

Country

9. Name and Address of Current Registered Agent

25

FILED
Jan 23 1997 8:00am
Secretary of State

	3. Date Incorporated or Qualified 12/20/1994	3a. Date of Last Report 06/13/1996
	4. FEI Number	Applied Far
	59-3283303	Not Applicable
۵	5. Certificate of Status Desired	\$8.75 Additional Fee Required
	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
	8. This corporation has liability for in	ntangible tax under s. 199.032,] Yes : \[\text{No} \]
	10. Name and Address of New Re-	gistered Agent
Name		
Street Ad	dress (P.O. Box Number is Not Acceptable GVLF BLVI	le)

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Familiar with land accept the obligations of, Section 607.0505, Florida Statutes. (NOTE: Beg stered Agent signature required when reinstating) mic of reached agost and profit soul as OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12. DECETE 1.1 TO LE Change ___ Addition TIH LANG, GREGORY D 1.2 NAME 32E034 NAME 1516 GULF BLVD. STREET ADDRESS 1.3 STREET ADDRESS GULP CEDAR KEY FL 32625 1.4 CITY-SI-ZIP OHY-51-26 DELETE 2: TITLE Change Addition TITLE 22 NAME NAME 2.3 STREET ADDRESS STREET APPORTS 2. 4 City-\$1-7/P DELETE Change Addition THU 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ACTORESS 3 4. C(1Y-ST-ZIP DELETE Addition ☐ Change 4.1 TITLE TELE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS C-TY - ST- ZIP 44 CITY-ST-ZIP DELETE Addition 51 THLE THEE NAM: 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CHY-\$1-202 5.4 CHY-ST-ZIP DELETE Change ___ Addition $\Pi_{\mathfrak{L}}$ 6 1 Title 6.2 NAME NAME STREET ADDRESS 63 STREET ADDRESS 64 CITY-ST-ZIP CITY - \$1 - 769

Country

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14. I do hereby cert/y 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Concept D. Lacy GIREGORY D. LANG 1-4-97 352-543-5692