


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 02, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # P97000046564 1. Entity Name CEDAR KEY GULF COAST GOLDS, INC.	
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Principal Place of Business 12418 SR 24 CEDAR KEY, FL 32625 US	Mailing Address P.O. BOX 516 CEDAR KEY, FL 32625 US
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**DO NOT WRITE IN THIS SPACE**



03172006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3450431	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

**6. Name and Address of Current Registered Agent**

HATHCOX, SHEILA  
12418 S.R. 24  
CEDAR KEY, FL 32625

**DO NOT WRITE  
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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

000000558701  
05/17/06-80104-024 150.00

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD HATHCOX, GARY W 12418 SR 24 CEDAR KEY, FL 32625
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HATHCOX, SHEILA D 12418 SR 24 CEDAR KEY, FL 32625
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IN THIS SPACE**

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Sheila D. Hathcox Sheila D. Hathcox 4-29-06 352-5439720  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #