


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 22, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # 539174**  
 1. Entity Name  
**CEDARS CONDOMINIUM CORPORATION**



Principal Place of Business      Mailing Address  
 5100 87TH ST. E.      5100 87TH ST. E.  
 BRADENTON, FL 34211 US      BRADENTON, FL 34211 US

**DO NOT WRITE IN THIS SPACE**



02082008    No Chg-P    CR2E034 (11/05)

4. FEI Number      Applied For  
**59-1768645**      Not Applicable

5. Certificate of Status Desired        **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
 HOGAN, PATRICK  
 5100 87TH ST. E.  
 BRADENTON, FL 34211

**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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

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

BASE  
 1100000913729  
 05/08/08-80030-014 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD HUNT, R A 5100 87TH ST. E. BRADENTON, FL 34211
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VST HOGAN, PATRICK 5100 87TH ST. E. BRADENTON, FL 34211
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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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:** *[Signature]*      4/15/08      (941) 758-2424  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #