

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2004 8:00 am
Secretary of State

04-05-2004 90051 006 ****80.00

DOCUMENT # 762733 1. Entity Name KEYSTONE MANOR CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 2225 NE 123RD STREET (BROAD CAUSEWAY) NORTH MIAMI, FL 33181			Mailing Address 2225 NE 123 ST NORTH MIAMI, FL 33181		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address PO Box 292874 Suite, Apt. #, etc.			
City & State Zip		City & State Dawic, FL 33328 Zip		4. FEI Number 59-2183439 Applied For <input type="checkbox"/> Not Applicable	
Country USA		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent FARDALES, SONIA 2225 NE 123 ST MIAMI, FL 33181					
7. Name and Address of New Registered Agent Name L.J. Services Group Street Address (P.O. Box Number is Not Acceptable) 5031 SW 94 Ave City Cooper City FL Zip Code 33328					
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  Linda E. J. Laredo 3/10/04 <small>Signature, typed or printed name of registered agent and when applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution, <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD FARDALES, SONIA 2225 NE 123 ST RAGLAND, AL 35131 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Gerald Brinkworth 2225 NE 123 ST #113 N. Miami, FL 33181 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD CORTEZ, STEPHANIE 2245 BISCAYNE BAY DRIVE N. MIAMI, FL 33181 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD, TD Erick Pardi 2225 NE 123 ST #115 N. Miami, FL 33181 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHWARTZ, DAREN 12780 MAPLE ROAD N. MIAMI, FL 33181 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Veronica Fascio 2225 NE 123 ST #112 N. Miami, FL 33181 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D John Tomzack 2225 NE 123 ST #214 N. Miami, FL 33181 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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 617, 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:  Gerald J Brinkworth 3-25-04 (305) 415-6547 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					