2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 08, 2005 08:00 AM

DOCUMENT # M67909 1. Entity Name KEYSTONE INVESTMENT PROPERTIES, INC.					Secretary of State				
Principal Place of Business 1010 ORANGE AVE. WINTER PARK, FL 32789 US Mailing Address 1010 ORANGE AVE. STE. 101 WINTER PARK, FL 32789			39 US	S	 		acan anda ang		**
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03212005	Chg-P	CR2E03	4 (10/03)		
City & State		City & State		4. FEI Number 59-28760	015			ptied For at Applicable	
Zip	Country Zip Cou		Countr	Ту	5. Certificate of	Status Desired		8.75 Add se Require	
6. N	ame and Address of Current	7. Name and A	ddress of New R	egistered Ag	ent				
MAROON, WILLIAM S. 1010 ORANGE AVE. WINTER PARK, FL 32789				Name Street Address (P.O. Box Number is Not Acceptable)					
			-	City			FL	Zip Cod	Ð
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									
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees							· · · · · · · · · · · · · · · · · · ·		
10.	OFFICERS AND		11.		ADDITIONS/CI	HANGES TO OFFI			
STREET ADDRESS 1010	OON, LOLA A. DRANGE AVE. ER PARK, FL 32789	Delete	TITLE NAME STREE CITY-5	T ADDRESS ST-ZIP			1	Change	☐ Addition
STREET ADDRESS 1010	OON, WILLIAM S. DRANGE AVE. ER PARK, FL 32789	☐ Delete "'	TITLE" NAME STREET	r address		U00000 04/08/05-	1293 769 -80043-1	□ Chạnge 006 19	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET CITY-S	r address ST-ZIP			[Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET CITY-S	T ADDRESS ST- ZIP			(Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET CITY-S	r address St-Zip]	_ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	at the Information supplied with	□ Delete	спу-я					Change	Addition

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 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.

GNATURE:

3. 21. 65

407. 777; 1083

SIGNATURE:

3. 21. 65 Date