2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2005 8:00 am
Secretary of State
01-28-2005 90033 038 ****61.25

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DOCUMENT # N47802

1. Entity Name
KEYSTONE SQUARE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
524 PAUL MORRIS DR ENGLEWOOD, FL 34223 US	5206 THE POINTE ENGLEWOOD, FL 34223 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	P.O. Box 974 Suite, Apt. #, etc.
City & State	City & State: Englewood, FL
Zip / Country	Zip: 34295 / Country: USA

01102005 Chg-NP CR2E037 (10/03)

4. FEI Number: 65-0400157 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
~~DIGNAM, THOMAS M~~ 5206 THE POINTE ENGLEWOOD, FL 34223	Name: Joey Whitmarsh Street Address (P.O. Box Number is Not Acceptable): 524 Paul Morris Dr. Unit E City: Englewood FL Zip Code: 34223

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] Joey Whitmarsh Pres. 1-10-05
(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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	D DIGNAM, THOMAS M. 5206 THE POINTE ENGLEWOOD, FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Pres. Joey Whitmarsh 524 Paul Morris Dr. Suite E Englewood, FL 34223 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MARTINEAU, PAUL J. 180 RICH STREET VENICE, FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treas/D Mark C. DeRose 524 Paul Morris Dr. Suite G Englewood, FL 34223 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MARTINEAU, ALBERT 1336 OAK POINT CT VENICE, FL 34294	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/D William Schork 7179 Brookhaven Terr. Englewood, FL 34224 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ 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: [signature] Joey Whitmarsh 1-10-05 (941) 474-6715
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #