## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 727404**

FILED Jan 14, 2009 Secretary of State

Entity Name: KEYSTONE HARBOR CLUB CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 13155 IXORA COURT N MIAMI, FL 33181 **Current Mailing Address: New Mailing Address:** 13155 IXORA COURT N MIAMI, FL 33181 US FEI Number: 59-1542964 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ROBERT KAYE & ASSOCIATES, P.A 6261 NORTHWEST 6 WAY, SUITE 103 FORT LAUDERDALE, FL 33309 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. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition ANTHONY, JAMES Name: Name: 13155 IXORA CT #407 Address: Address: City-St-Zip: N. MIAMI, FL 33181 City-St-Zip: Title: ( ) Delete Title: SD (X) Change ( ) Addition TOLEDO, MARIA Name: ROMERO, DIANE Name: Address: 13155 IXORA CT. #1101 Address: 13155 IXORA CT. #505 City-St-Zip: MIAMI, FL 33181 City-St-Zip: MIAMI, FL 33181 Title: () Delete Title: (X) Change ( ) Addition GEORGANHDES, DAMOS GUARA, MARCUS Name: Name: 13155 IXORA CT #801 Address: Address: 13155 IXORA CT #510 City-St-Zip: NORTH MIAMI, FL 33181 City-St-Zip: NORTH MIAMI, FL 33181 ( ) Delete Title: SD Title: VPD (X) Change ( ) Addition PAQOULATOS, GERRY Name: Name: PAQOULATOS, GERRY 13155 IXORA CT #305 13155 IXORA CT #305 Address: Address: City-St-Zip: MIAMI, FL 33181 City-St-Zip: MIAMI, FL 33181 Title: VΡ () Delete Title: (X) Change ( ) Addition MENDEZ, JORGE WINCHESTER, JUNELLE Name: Name: 13155 IXORA CT #1005 13155 IXORA CT #1108 Address: Address: City-St-Zip: N. MIAMI, FL 33181 City-St-Zip: N. MIAMI, FL 33181

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES ANTHONY PD 01/14/2009