

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 416284

FILED  
Jan 19, 2005  
Secretary of State

Entity Name: H.W. KEISTER ASSOCIATES, INC.

## Current Principal Place of Business:

4019 WOODCOCK DRIVE  
SUITE 201  
JACKSONVILLE, FL 32207 US

## New Principal Place of Business:

## Current Mailing Address:

4019 WOODCOCK DRIVE  
SUITE 201  
JACKSONVILLE, FL 32207 US

## New Mailing Address:

FEI Number: 59-1435681

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

KEISTER, MARK J.  
7355 BUCKSKIN TRAIL S  
JACKSONVILLE, FL 32277 US

## Name and Address of New Registered Agent:

KEISTER, MARK J PS  
7355 BUCKSKIN TRAIL S  
JACKSONVILLE, FL 32277 US

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: MARK J KEISTER

01/19/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VPT ( ) Delete  
Name: WEBB, DAVID L  
Address: 4019 WOODCOCK DRIVE SUITE 201  
City-St-Zip: JACKSONVILLE, FL 32207

Title: PS ( ) Delete  
Name: KEISTER, MARK J.,  
Address: 4019 WOODCOCK DRIVE SUITE 201  
City-St-Zip: JACKSONVILLE, FL 32207

Title: D ( ) Delete  
Name: KAUFMAN, J GILBERT  
Address: 4019 WOODCOCK DRIVE SUITE 201  
City-St-Zip: JACKSONVILLE, FL 32207

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPT (X) Change ( ) Addition  
Name: WEBB, DAVID L  
Address: 4019 WOODCOCK DRIVE SUITE 201  
City-St-Zip: JACKSONVILLE, FL 32207

Title: PS (X) Change ( ) Addition  
Name: KEISTER, MARK J  
Address: 4019 WOODCOCK DRIVE SUITE 201  
City-St-Zip: JACKSONVILLE, FL 32207

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK J KEISTER

PS

01/19/2005

Electronic Signature of Signing Officer or Director

Date