

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 416284

FILED  
Mar 08, 2012  
Secretary of State

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

**Current Principal Place of Business:**

6501 ARLINGTON EXPRESSWAY  
BUILDING B, SUITE 201  
JACKSONVILLE, FL 322115795 US

**New Principal Place of Business:**

**Current Mailing Address:**

6501 ARLINGTON EXPRESSWAY  
BUILDING B, SUITE 201  
JACKSONVILLE, FL 322115795 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 PS  
5205 RIVERTON ROAD  
JACKSONVILLE, FL 322771327 US

**Name and Address of New Registered Agent:**

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:**

Title: VPT  
Name: WEBB, DAVID L  
Address: 6501 ARLINGTON EXPRESSWAY, B-201  
City-St-Zip: JACKSONVILLE, FL 322115795 US

Title: PS  
Name: KEISTER, MARK J  
Address: 6501 ARLINGTON EXPRESSWAY, B-201  
City-St-Zip: JACKSONVILLE, FL 322115795 US

Title: D  
Name: KAUFMAN, J GILBERT  
Address: 6501 ARLINGTON EXPRESSWAY, B-201  
City-St-Zip: JACKSONVILLE, FL 322115795 US

I hereby 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 all other like empowered.

SIGNATURE: MARK J. KEISTER

PS

03/08/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date