

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 07, 2008 8:00 am
Secretary of State

05-07-2008 90111 050 ****61.25

DOCUMENT # 703097

1. Entity Name

KEYSTONE CIVIC ASSOCIATION, INC.



Principal Place of Business

17926 GUNN HIGHWAY
P.O. BOX 95
ODESSA FL 33556

Mailing Address

17926 GUNN HIGHWAY
P.O. BOX 95
ODESSA FL 33556



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MOORE, CHARLES C
13924 FRIENDSHIP LANE
ODESSA FL 33556

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 \$61.25
Due By May 1, 2008

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

TITLE VD ☒ Delete
NAME BENOIT, DEBRA
STREET ADDRESS POB 777
CITY-ST-ZIP ODESSA FL 33556

TITLE RS ☐ Delete
NAME DOWLING, BARBARA
STREET ADDRESS 4715 HEATH RD
CITY-ST-ZIP TAMPA FL 33624

TITLE TD ☐ Delete
NAME MOORE, CHARLES
STREET ADDRESS 13924 FRIENDSHIP LANE
CITY-ST-ZIP ODESSA FL

TITLE CS ☐ Delete
NAME MORRIS, STEVE
STREET ADDRESS 18520 WAYNE ROAD
CITY-ST-ZIP ODESSA FL 33556

TITLE D ☐ Delete
NAME SCHELLENBERG, JO
STREET ADDRESS 18240 WALNE RD
CITY-ST-ZIP ODESSA FL 33556

TITLE PD ☐ Delete
NAME ADERHOLD, TOM
STREET ADDRESS PO BOX 272879
CITY-ST-ZIP TAMPA FL 33624

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VD ☐ Change ☒ Addition
NAME Nelson, Jan
STREET ADDRESS 18440 Wayne Rd
CITY-ST-ZIP Odessa, FL 33556

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

Charles C. Moore Charles C. Moore

Date

Daytime Phone #

4-30-08