

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734026

FILED  
Feb 02, 2010  
Secretary of State

**Entity Name:** KEYSTONE SENIOR SERVICE, INC.

**Current Principal Place of Business:**

125 COMMERCIAL AVE.  
KEYSTONE HEIGHTS, FL 32656 US

**New Principal Place of Business:**

**Current Mailing Address:**

125 COMMERCIAL AVE  
KEYSTONE HEIGHTS, FL 32656 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

GREEN, LLOYD A.  
335 E. LAKEVIEW DR.  
KEYSTONE HGHTS, FL 32660 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: P  
Name: PICKENS, DAN  
Address: 7065 GATOR BONE RPAD  
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: VP  
Name: LEE, BILL  
Address: 7729 BEACHVIEW STREET  
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: RS  
Name: HUNHOLZ, HOLLY  
Address: 6489 BROOKLYN BAY ROAD, P.O. BOX 1520  
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: T  
Name: CALE, PAULINE  
Address: 6491 LOCH LOMMOND DRIVE  
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: OM  
Name: CARROLL, BARBARA  
Address: 125 COMMERCIAL AVENUE  
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PAULINE

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02/02/2010

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

\_\_\_\_\_  
Date