2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2009
Secretary of State

DOCUMENT# 746263

Entity Name: LAKE KEYSTONE PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

18240 WAYNE ROAD
ODESSA, FL 33556

New Principal Place of Business:

Current Mailing Address:

8613 VIVIAN BASS WAY
ODESSA, FL 33556

New Mailing Address:

FEI Number: 59-1924215 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WERNER, TOM
8613 VIVIAN BASS WAY
ODESSA, FL 33556 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	( ) Delete
Name:	SWAIN, JIM	
Address:	18240 WAYNE ROAD	
City-St-Zip:	ODESSA, FL 33556	
Title:	VP	( ) Delete
Name:	EBERBACH, MARK	
Address:	18009 CRAWLEY ROAD	
City-St-Zip:	ODESSA, FL 33556	
Title:	T	( ) Delete
Name:	WERNER, TOM	
Address:	8613 VIVIAN BASS WAY	
City-St-Zip:	ODESSA, FL 33556	
Title:	D	( ) Delete
Name:	MANNING, APRIL	
Address:	18109 CROWLEY ROAD	
City-St-Zip:	ODESSA, FL 33556	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: THOMAS J. WERNER T 01/29/2009

Electronic Signature of Signing Officer or Director — Date