

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750883

FILED  
Jan 15, 2009  
Secretary of State

Entity Name: KEYSTONE GARDENS CONDOMINIUM, INC.

**Current Principal Place of Business:**

2430 NE 135 STREET  
N. MIAMI, FL 33181

**New Principal Place of Business:**

**Current Mailing Address:**

741 PETUNIA DRIVE  
PLANTATION, FL 33317

**New Mailing Address:**

FEI Number: 59-1979656

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEVY, JANICE  
741 PETUNIA DRIVE  
PLANTATION, FL 33317 US

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

JANICE LEVY & ASSOCIATES, INC.  
741 PETUNIA DRIVE  
PLANTATION, FL 33317 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: JANICE LEVY

01/15/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: POLL, KAREN  
Address: 2430 NE 135TH STREET #103  
City-St-Zip: N, MIAMI, FL 33181

Title: VP ( ) Delete  
Name: WEINSTEIN, KING  
Address: 2430 NE 135 ST.  
City-St-Zip: N. MIAMI, FL 33181

Title: TR ( ) Delete  
Name: RODRIQUEZ, DAVID  
Address: 2430 NE 135TH STREET  
City-St-Zip: N.MIAMI, FL 33181

Title: SEC ( ) Delete  
Name: MORRISSEY, WILLIAM  
Address: 2430 NE 135TH STREET,  
City-St-Zip: N. MIAMI, FL 33181

Title: D ( ) Delete  
Name: SHARP, AUDREY  
Address: 2430 NE 135TH ST.  
City-St-Zip: MIAMI, FL 33181

**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:

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: DENISE POLL

PR

01/15/2009

Electronic Signature of Signing Officer or Director

Date