2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F01000001021

Title:

Title:

Name:

Address:

City-St-Zip:

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STD

SCHOLL, TONY L

FORT MYERS, FL 33901

() Delete

1375 JACKSON STREET, STE 401

() Delete

Entity Name: KEYSTONE COAL COMPANY

FILED Nov 06, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1375 JACKSON STREET, STE 401 FORT MYERS, FL 33901 **Current Mailing Address: New Mailing Address:** 1375 JACKSON STREET, STE 401 FORT MYERS, FL 33901 FEI Number: 23-2331594 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCHOLL, TOM 1375 JACKSON STREET US FORT MYERS, FL 33901 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: SHPD (X) Change () Addition SCHOLL, TOM Name: Name: SCHOLL, TOM 1375 JACKSON STREET, STE 401 1375 JACKSON STREET, STE 401 Address: Address: City-St-Zip: FORT MYERS, FL City-St-Zip: FORT MYERS, FL SD Title: **EVP** Title: () Delete (X) Change () Addition CHUNG, IN Y Name: CHUNG, IN Y Name: 1375 JACKSON STREET, STE 401 1375 JACKSON STREET, STE 401 Address: Address: FORT MYERS, FL City-St-Zip: City-St-Zip: FORT MYERS, FL Title: STD () Delete Title: TD (X) Change () Addition SCHIPP, JANE SCHIPP, JANE Name: Name: 1375 JACKSON STREET, STE 401 1375 JACKSON STREET, STE 401 Address: Address: City-St-Zip: FORT MYERS, FL City-St-Zip: FORT MYERS, FL

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

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

VPD

SCHOLL, TONY L

SCHOLL, JOE S

FORT MYERS, FL 33901

FORT MYERS, FL 33901

(X) Change () Addition

() Change (X) Addition

1375 JACKSON STREET, STE 401

1375 JACKSON ST. - SUITE 401

SIGNATURE: JANE SCHIPP TD 11/06/2009