2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K52539

Name: KEYSTER AND COMPANY, INC

115 BERKSHIRE LANE

PALM COAST, FL 32137

Address: City-St-Zip: FILED May 02, 2008 Secretary of State

Entity Nar	ne: KEYSTER AND	COMPANY, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	NANDERSON BEACH, FL 32136	US			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	ANDERSON BEACH, FL 32136	US	5107 JOHN ANDERS FLAGLER BEACH, FL		
FEI Number:	59-2924789 FEI N	umber Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
BAGGETT, G. LAURENCE ESQ 523 N HALIFAX AVE DAYTONA BEACH, FL 32018 US			5107 JOHN ANDERS	BAGGETT, G. LAURENCE ESQ 5107 JOHN ANDERSON HWY. FLAGLER BEACH, FL 32136 US	
The above in the State		s this statement for the pu	urpose of changing its registere	d office or registered agent, or both,	
SIGNATURE:				05/02/2008	
	Electronic Sigr	ature of Registered Age	nt	Date	
	e with s. 607.193(2)(b), ppaign Financing Trust I	F.S., the corporation did not Fund Contribution ().	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () Delete KNAPP, MICHAEL D., 5107 JOHN ANDERSON FLAGLER BEACH, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete KNAPP, NANCY J., 5107 JOHN ANDERSON FLAGLER BEACH, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D (X) Delete KNAPP, JEFFREY D.,		Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: NANCY J. KNAPP D 05/02/2008