

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000054784

Entity Name: KEYSTONE ASSETS, LLC

FILED
Feb 19, 2008
Secretary of State

Current Principal Place of Business:

17585 133RD WAY
JUPITER, FL 33478

New Principal Place of Business:

13434 WEST INDIANTOWN ROAD
JUPITER, FL 33478

Current Mailing Address:

13434 WEST INDIANTOWN ROAD
JUPITER, FL 33478

New Mailing Address:

FEI Number: 51-0565930

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

O'BRIEN, JOHN E
13434 WEST INDIANTOWN ROAD
JUPITER, FL 33478 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CUMMINGS, PETER
Address: 17885 133RD WAY NORTH
City-St-Zip: JUPITER, FL 33478

Title: MGRM () Delete
Name: O'BRIEN, JOHN E
Address: 13434 W. INDIANTOWN ROAD
City-St-Zip: JUPITER, FL 33478

Title: MGRM (X) Delete
Name: MOORE, DONALD J
Address: 17585 133RD WAY NORTH
City-St-Zip: JUPITER, FL 33478

Title: MGRM () Delete
Name: CUMMINGS, FRANCES
Address: 17885 133RD WAY NORTH
City-St-Zip: JUPITER, FL 33478

Title: MGRM () Delete
Name: BRINKMAN, SHIRLEY L
Address: 13434 W. INDIANTOWN ROAD
City-St-Zip: JUPITER, FL 33478

Title: MGRM (X) Delete
Name: MOORE, KATHLEEN A
Address: 17585 133RD WAY NORTH
City-St-Zip: JUPITER, FL 33478

ADDITIONS/CHANGES:

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
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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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOHN O'BRIEN

MGRM

02/19/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date