

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000054784

Entity Name: KEYSTONE ASSETS, LLC

FILED  
Mar 20, 2009  
Secretary of State

## Current Principal Place of Business:

13434 WEST INDIANTOWN ROAD  
JUPITER, FL 33478

## New Principal Place of Business:

## 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 ( )

## 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 ( ) 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

## 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  
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

03/20/2009

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