2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000064180

Entity Name: KEYSTONE BENEFIT GROUP LLC

FILED May 04, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7839 HUNTERS GROVE ROAD 10175 FORTUNE PARKWAY JACKSONVILLE, FL 32256

SUITE 603

JACKSONVILLE, FL 32256

HANDLEE, CHRISTOPHER S

10175 FORTUNE PARKWAY

MGRM

(X) Change () Addition

(X) Change () Addition

HANDLEE, CHRISTOPHER

DEVAUX, MICHAEL

10175 FORTUNE PARKWAY #603

JACKSONVILLE, FL 32256 US

7839 HUNTERS GROVE ROAD

JACKSONVILLE, FL 32256

ADDITIONS/CHANGES:

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

Current Mailing Address: New Mailing Address:

7839 HUNTERS GROVE ROAD 10175 FORTUNE PARKWAY #603 JACKSONVILLE, FL 32256 JACKSONVILLE, FL 32256

FEI Number: 20-5468225 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

HANDLEE, CHRISTOPHER S 4600 TOUCHTON RD SUITE 200

SUITE 603 JACKSONVILLE, FL 32246 US JACKSONVILLE, FL 32256 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: 05/04/2007

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

MGRM () Delete HANDLEE, CHRISTOPHER Name: Address: 4600 TOUCHTON RD

City-St-Zip: JACKSONVILLE, FL 32246 US

Title: MGRM () Delete

Name: DEVAUX, MIKE Address: 7839 HUNTERS GROVE ROAD

City-St-Zip: JACKSONVILLE, FL 32246

Title: () Delete Title: MGRM () Change (X) Addition

Name: SALLAS, STEVEN R Name:

10175 FORTUNE PARKWAY #603 Address: Address: City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32256

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: MICHAEL DEVAUX **MGRM** 05/04/2007