

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000003716

Entity Name: KEYSTONE ICP IV LLC

FILED  
Mar 08, 2005  
Secretary of State

**Current Principal Place of Business:**

200 FOUR FALLS, SUITE 208  
WEST CONSHOHOCKEN, PA 19428

**New Principal Place of Business:**

14100 E. 35TH PLACE  
AURORA, CO 80011

**Current Mailing Address:**

200 FOUR FALLS, SUITE 208  
WEST CONSHOHOCKEN, PA 19428

**New Mailing Address:**

14100 E. 35TH PLACE  
AURORA, CO 80011

FEI Number: 84-1247793

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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/MEMBERS:**

Title: MGRM ( ) Delete  
Name: KEYSTONE OPERATING P, ARTNERSHIP, L. P .  
Address: 200 FOUR FALLS, SUITE 208  
City-St-Zip: WEST CONSHOHOCKEN, PA 19428

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: KEYSTONE OPERATING P, ARTNERSHIP, L. P .  
Address: 14100 E. 35TH PLACE  
City-St-Zip: AURORA, CO 80011

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: EDWARD S. NEKRITZ

VP

03/08/2005

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