# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 21, 2008**
**Secretary of State**

DOCUMENT# N03000005200

**Entity Name:** KEYSTONE RESERVE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

18740 HILLSTONE DRIVE
ODESSA, FL 33556

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 181
ODESSA, FL 33556

**New Mailing Address:**

**FEI Number: 43-2035905** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

MCCLOUD, ELAINE
18740 HILLSTONE DR.
ODESSA, FL 33556 US

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

MCCLOUD, WILLIE
18740 HILLSTONE DR.
ODESSA, FL 33556 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: WILLIE H MCCLOUD 01/21/2008
Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete
Name: MCCLOUD, ELIANE
Address: 18740 HIILSTONE DR
City-St-Zip: ODESSA, FL 33556

Title: VP ( ) Delete
Name: KELAITA, JAMES
Address: 18701 HILLSTONE DRIVE
City-St-Zip: ODESSA, FL 33556

Title: STD ( ) Delete
Name: HARDWICK, ASHLEY
Address: 8619 JACKSON SPRINGS RD
City-St-Zip: TAMPA, FL 33615

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: STD (X) Change ( ) Addition
Name: MCCLOUD, WILLIE
Address: 18740 HIILSTONE DR
City-St-Zip: ODESSA, FL 33556

Title: P (X) Change ( ) Addition
Name: HUNT, MARTHA
Address: 18389 WAYNE ROAD
City-St-Zip: ODESSA, FL 33556

Title: VP (X) Change ( ) Addition
Name: CARROLL, TINA
Address: 7620 DUNBRIDGE DRIVE
City-St-Zip: ODESSA, FL 33556

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIE H MCCLOUD STD 01/21/2008
Electronic Signature of Signing Officer or Director Date