2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002263

FILED Jan 11, 2006 Secretary of State

Entity Name: KEYSTONE EXECUTIVE CENTER CONDOMINIUM ASSOCIATION, INC.

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

6526 VIA ROSA DR 6526 VIA ROSA

BOCA RATON, FL 33433 BOCA RATON, FL 33433

Current Mailing Address: New Mailing Address:

6526 VIA ROSA DR 6526 VIA ROSA

BOCA RATON, FL 33433 BOCA RATON, FL 33433

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

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

NAMCILLA, JOSEPH WEISBLAT, JACK MM

3111 STIRLING RD 6526 VIA ROSA

FT LAUDERDALE, FL 33312 US BOCA RATON, FL 33433 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: JACK WEISBLAT 01/11/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: MM (X) Change () Addition

 Name:
 WEISBLAT, JACK
 Name:
 WEISBLAT, JACK

 Address:
 6526 VIA ROSA DR
 Address:
 6526 VIA ROSA

 City-St-Zip:
 BOCA RATON, FL 33433
 City-St-Zip:
 BOCA RATON, FL 33433

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

 Name:
 WEISBLAT, MICHELLE
 Name:

 Address:
 2200 NE 33 AVE #5-B
 Address:

 City-St-Zip:
 FT LAUDERDALE, FL 33305
 City-St-Zip:

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

 Name:
 GREZELJ, CARYN
 Name:

 Address:
 8601 NW 21 CT
 Address:

 City-St-Zip:
 CORAL SPRINGS, FL 33071
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JACK WEISBLAT MM 01/11/2006