2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006887

FILED Apr 30, 2008 Secretary of State

Entity Name: KEYSTONE SPRINGS HOMEOWNERS ASSOCIATION, INC.

07 PAUL	A DR S	e of Business:	New Prin	cipal Place of	f Business:	
	, FL 34698					
urrent M	lailing Addre	ess:	New Mail	ing Address:		
07 PAUL JUNEDIN	A DR S , FL 34698					
El Number	:	FEI Number Applied For ()	FEI Number Not App	licable (X)	Certificate of Status Desired ()
lame and	l Address of	Current Registered Agent:	: Name and	l Address of	New Registered Agent:	
09 PÁUL	UANNE S ES A DR S , FL 34698	QUIRE US				
	named entity e of Florida.	submits this statement for th	he purpose of changing	its registered	office or registered agent, or l	both,
the State	e of Florida.	r submits this statement for th	he purpose of changing	its registered	office or registered agent, or l	both,
the State	e of Florida. Î	onic Signature of Registered		its registered	office or registered agent, or l	both,
the State	e of Florida. Î	onic Signature of Registered	Agent			
n the State IGNATUI PFFICER tte: ame: ddress:	e of Florida. RE: Electro S AND DIRE	onic Signature of Registered CTORS:) Delete STEPHEN G R S	Agent	NS/CHANGES	Date	
the State	e of Florida. RE: Electro S AND DIRECT P (THOMPSON, 507 PAULA D DUNEDIN, FL	onic Signature of Registered CTORS:) Delete STEPHEN G R S 34698) Delete RYAN R S	Agent ADDITIOI Title: Name: Address:	NS/CHANGES	Date S TO OFFICERS AND DIREC	
pFFICER ttle: ame: ddress: ity-St-Zip: ttle: ame: ddress:	e of Florida. RE: Electro S AND DIRECT P (THOMPSON, 507 PAULA D DUNEDIN, FL V (THOMPSON, 507 PAULA D DUNEDIN, FL ST (DINIC Signature of Registered CTORS:) Delete STEPHEN G R S 34698) Delete RYAN R S 34698) Delete VINE S ESQUIRE R S	Agent ADDITIOI Title: Name: Address: City-St-Zip: Title: Name: Address:	NS/CHANGES	Date TO OFFICERS AND DIRECT) Change () Addition	

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: STEPHEN G. THOMPSON PRES 04/30/2008