2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010201

FILED Apr 15, 2008 Secretary of State

Entity Name: KEYSTONE PARK CONDOMINIUM ASSOCIATION, INC.

urrent F	Principal Place	OT Business:	New Principal Place	e ot Business:
242 NW /IIAMI, FL	2ND STREET . 33126			
urrent N	Mailing Addres	s:	New Mailing Addres	ss:
330 FON MAMI, FL	NTIANEBLEAU . 33172	BLVD		
El Numbe	r: 42-1722251	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame an	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
	AGEMENT INC NTIANEBLEAU . 33172 US			
	e named entity s te of Florida.	submits this statement for the p	ourpose of changing its register	ed office or registered agent, or bot
n the Stat	te of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or bot
n the Stat	te of Florida. IRE:	submits this statement for the particles of Registered Agr		ed office or registered agent, or bot Date
n the Stat SIGNATU	te of Florida. IRE:	nic Signature of Registered Ag	ent	
n the Stat	te of Florida. IRE: Electron S AND DIREC PD () MOURIZ, REIN 10 NW LEJEUN	nic Signature of Registered Ago TORS: Delete ALDO JE RD SUITE 400	ent	Date
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n the Stat SIGNATU DFFICER itle: lame: ddress:	te of Florida. IRE: Electron RS AND DIREC PD () MOURIZ, REIN 10 NW LEJEUN MIAMI, FL 331: VPD () MOURIZ, MIGU 10 NW LEJEUN MIAMI, FL 331: VPD () PUIG, ENRIQUI 10 NW LEJEUN	TORS: Delete ALDO JE RD SUITE 400 Delete EL JE RD SUITE 400 26 Delete EL JE RD SUITE 400 26 Delete EL JE RD SUITE 400 26 Delete EL JE RD SUITE 400	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	Date GES 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: REINALDO MOURIZ PD 04/15/2008