FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAR -2 PM 3:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N14208 (5)

1. Corporation Name
KEYSTONE RECREATION ASSOCIATION, INC.

Principal Place of Business
P O BOX 516
KEYSTONE HEIGHTS FL 32656-7516

Mailing Address
P O BOX 516
KEYSTONE HEIGHTS FL 32656-7516

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/07/1986
3a. Date of Last Report: 02/10/1994
4. FEI Number: 59-2900885 — Applied For ☐ Not Applicable ☐

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22
Suite, Apt. #, etc. — 27
City & State — 23
City & State — 28
Zip — 24
Country — 25
Zip — 29
Country — 30

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
GLENN, MICHAEL B.
207 JASMINE AVE.
SUITE 1200
KEYSTONE HEIGHTS FL 32656

10. Name and Address of New Registered Agent
81 Name: Williams, Mark
82 Street Address (P.O. Box Number is Not Acceptable): 5325 CR 352
83
84 City: Keystone Heights FL
85 Zip Code: 32656

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Mark Williams — 2-2-95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	1.1 TITLE	P	☒ Change ☐ Addition
NAME	GLENN, MICHAEL	1.2 NAME	Williams, Mark	
STREET ADDRESS	207 JASMINE	1.3 STREET ADDRESS	5325 CR 352	
CITY-ST-ZIP	KEYSTONE HEIGHTS FL	1.4 CITY-ST-ZIP	Keystone Heights, FL 32656	
TITLE	V	2.1 TITLE		☐ Change ☐ Addition
NAME	WATERS, TREVOR	2.2 NAME		
STREET ADDRESS	2631 S.E. 41ST PL	2.3 STREET ADDRESS		
CITY-ST-ZIP	MELROSE FL	2.4 CITY-ST-ZIP		
TITLE	VD	3.1 TITLE	VD	☒ Change ☐ Addition
NAME	HARPER, CHRISTY	3.2 NAME	Blackall, Nancy	
STREET ADDRESS	6384 ROLLING HILLS AVE	3.3 STREET ADDRESS	8335 SR 100	
CITY-ST-ZIP	KEYSTONE HTS FL	3.4 CITY-ST-ZIP	Melrose, FL 32666	
TITLE	TD	4.1 TITLE		☐ Change ☐ Addition
NAME	SHAW, DEAN	4.2 NAME		
STREET ADDRESS	2412 S.E. 80TH AVE.	4.3 STREET ADDRESS		
CITY-ST-ZIP	MELROSE FL	4.4 CITY-ST-ZIP		
TITLE	SD	5.1 TITLE	SD	☒ Change ☐ Addition
NAME	BOWSER, CHARLENE	5.2 NAME	Bannon, Kim	
STREET ADDRESS	CR 233 & 37TH PL	5.3 STREET ADDRESS	7440 Bionville Av	
CITY-ST-ZIP	STARKE FL	5.4 CITY-ST-ZIP	Keystone Heights, FL 32656	
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] — 27 Feb 95 — 904 475-2740
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0030015