

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15666

FILED
Mar 05, 2009
Secretary of State

Entity Name: KEYSTONE SOCIAL CLUB, INC.

Current Principal Place of Business:

5593 SW 3RD AVE
KEYSTONE HEIGHTS, FL 32656 US

New Principal Place of Business:

Current Mailing Address:

4262 SE 2ND AVE
KEYSTONE HEIGHTS, FL 32656 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

MONKO, ELIZABETH J
4262 SE 2ND AVE
KEYSTONE HEIGHTS, FL 32656 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DT () Delete
Name: MONKO, ELIZABETH
Address: 4262 SE 2ND AVE
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: DP () Delete
Name: FULMER, GLENORA
Address: 7700 SILVER SANDS RD
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: DV () Delete
Name: RAINS, ANN
Address: 6375 BAKER RD
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D2NV (X) Change () Addition
Name: RAINS, ANN
Address: 6375 BAKER RD
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: DV () Change (X) Addition
Name: PADGETT, MYRTLE
Address: 106 SERENITY DR
City-St-Zip: MELROSE, FL 326666

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: ELIZABETH J. MONKO

DT

03/05/2009

Electronic Signature of Signing Officer or Director

Date