

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23840

FILED
May 06, 2008
Secretary of State

Entity Name: KEYSTONE LAKE REGION BUSINESS ASSOCIATION, INC.

Current Principal Place of Business:

7426 SR 21
KEYSTONE HEIGHTS, FL 32656

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1891
KEYSTONE HEIGHTS, FL 32656

New Mailing Address:

FEI Number: 59-2872751 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

NORTON, JENNIFER
111 SORREL ST.
MIDDLEBURG, FL 32068 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: P () Delete
Name: WILLIAMS, REBECCA
Address: 6527 BROOKLYN BAY RD.
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: V () Delete
Name: NORTON, JENNIFER
Address: 111 SORREL ST.
City-St-Zip: MIDDLEBURG, FL 32068

Title: S () Delete
Name: DICKERSON, ROBY
Address: 350 S LAWRENCE BLVD. UNIT A
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: T () Delete
Name: ETHERIDGE, DEBORAH
Address: 50 SE 50TH STREET
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CARTER, REBECCA
Address: 6527 BROOKLYN BAY RD.
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: S (X) Change () Addition
Name: NORTON, JENNIFER
Address: 111 SORREL ST.
City-St-Zip: MIDDLEBURG, FL 32068

Title: V (X) Change () Addition
Name: PLASTER, SUE
Address: 7426 SR 21
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: T (X) Change () Addition
Name: GILLIEN, SYLVIA
Address: 298 S. LAWRENCE BLVD.
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

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: BECKY CARTER

P

05/06/2008

Electronic Signature of Signing Officer or Director

Date