2007 NOT-FOR-PROFIT CORPORATION **FILED ANNUAL REPORT** Apr 27, 2007 08:00 Al Secretary of State **DOCUMENT # N93000004248** 1. Entity Name KEYSTONE PARK COLONY HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address P.O. BOX 801 P.O. BOX 801 ODESSA, FL 33556 **ODESSA, FL 33556** 04232007 No Chg-NP CR2E037 (4/06) DO NOT WRITE IN THIS SPACE 4. FEI Number 59-3263060 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KENNEDY, BRUCE E DO NOT WRITE 1625 COQUT CT ODESSA, FL 33556 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. Election Campaign Financing

Trust Fund Contribution.

Filling Fee is \$61.25

Due by May 1, 2007

OFFICERS AND DIRECTORS

10.

TITLE

D

SIGNATURE:

Applied For

Not Applicable

NAME STREET ADDRESS CITY-ST-ZIP	SCHAER, SKIP 1650 COQUI COURT ODESSA, FL 33556	000000738872 05/14/07-80002-007 61.25 DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WARFORD, SHELIA 1925 SCHAER WAY ODESSA, FL 33556	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KENNEDY, BRUCE 1625 COQUT CT ODESSA, FL 33556	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
Indicated	on this report or supplemental report is true and accurate and that my signatu	mptions contained in Chapter 119, Florida Statutes. I further certify that the information re shall have the same legal effect as if made under oath; that I am an officer or director and by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

\$5.00 May Bo

Added to Fees