

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001015

FILED
Jan 07, 2009
Secretary of State

Entity Name: KEYSTONE HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

INTEGRITY ASSOCIATION MANAGEMENT, INC.
701 ENTERPRISE ROAD EAST, SUITE 704
SAFETY HARBOR, FL 34695

New Principal Place of Business:

INTEGRITY ASSOCIATION MANAGEMENT, INC.
701 ENTERPRISE ROAD EAST, SUITE 405
SAFETY HARBOR, FL 34695

Current Mailing Address:

INTEGRITY ASSOCIATION MANAGEMENT, INC.
701 ENTERPRISE ROAD EAST, SUITE 704
SAFETY HARBOR, FL 34695

New Mailing Address:

INTEGRITY ASSOCIATION MANAGEMENT, INC.
701 ENTERPRISE ROAD EAST, SUITE 405
SAFETY HARBOR, FL 34695

FEI Number: 59-3300989

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CIANFRONE, JOSEPH R
1964 BAYSHORE BLVD
DUNEDIN, FL 43698 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: SD () Delete
Name: MINER, ROBERT
Address: 387 CARRIAGE HOUSE LN
City-St-Zip: TARPON SPRINGS, FL 34688

Title: D () Delete
Name: HERNANDEZ, FRANCISO
Address: 442 KNIGHT DRIVE
City-St-Zip: TARPON SPRINGS, FL 34688

Title: TD () Delete
Name: HAVLIK, THOMAS
Address: 384 CARRIAGE HOUSE LANE
City-St-Zip: TARPON SPRINGS, FL 34688

Title: D () Delete
Name: DONNELLY, JOHN
Address: 3124 FETLOCK CT
City-St-Zip: TARPON SPRINGS, FL 34688

Title: D () Delete
Name: MEDFORD, JONATHAN
Address: 488 BRIDLE PATH WAY
City-St-Zip: TARPON SPRINGS, FL 34688

Title: PD () Delete
Name: SEITZ, JOSEPH
Address: 392 BRIDLE PATH WAY
City-St-Zip: TARPON SPRINGS, FL 34688

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: JOSEPH SEITZ

PRES

01/07/2009

Electronic Signature of Signing Officer or Director

Date