

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 25, 2004 8:00 am
Secretary of State

02-25-2004 90033 018 ***150.00

DOCUMENT # P03000036580

1. Entity Name

KEYSTONE DEVELOPMENT ORGANIZATION, INC.



Principal Place of Business

900 BURMA ROAD STE 102
PALM BEACH GARDENS FL 33403

Mailing Address

900 BURMA ROAD STE 102
PALM BEACH GARDENS FL 33403

54011463

2. Principal Place of Business

9000 Burma Rd
Suite, Apt. #, etc.
102

3. Mailing Address

9000 Burma Rd
Suite, Apt. #, etc.
102



MOORE

CR2E034 (11/03)

City & State

City & State

4. FEI Number

56-2336786

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

POLLER, NEALE J
550 BILTMORE WAY STE 700
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name

Jules S. Minker

Street Address (P.O. Box Number is Not Acceptable)

9000 Burma Rd

Suite 102

City

Palm Bch Gdns

FL

Zip Code

33403

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]

Signature, typed or printed name of registered agent and title if applicable.

Jules S Minker P

(NOTE: Registered Agent signature required when reinstating)

2-18-04

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PSTD ☐ Delete
NAME MINKER, JULES S
STREET ADDRESS 900 BURMA ROAD STE 102
CITY-ST-ZIP PALM BEACH GARDENS FL 33403

TITLE VD ☒ Delete
NAME BERGER, ROBERT D
STREET ADDRESS 900 BURMA ROAD STE 102
CITY-ST-ZIP PALM BEACH GARDENS FL 33403

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 9000 Burma Rd, Suite 102
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jules S Minker

2-18-04

Date

561 775 5660

Daytime Phone #