## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000041245

Entity Name: KEYSTONE VILLAGE LAUNDRY, INC.

Apr 21, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

POST OFFICE BOX 15789 4602 CARLTON DUNES DR.

FERNANDINA BEACH, FL 32035 US APT 7

FERNANDINA BEACH, FL 32034 US

**Current Mailing Address: New Mailing Address:** 

POST OFFICE BOX 15789

US FERNANDINA BEACH, FL 32035

FEI Number: 04-3845760 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROSS, ROBERT A STOCKMAN, JAMES J 4602 CARLTON DUNES DRIVE 20725 SW 46TH AVE. NEWBERRY, FL 32669 US

FERNANDINA BEACH, FL 32034 US

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: JAMES J STOCKMAN 04/21/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

ROSS, ROBERT A Name: Name: ROSS, ROBERT A Address:

4602 CARLTON DUNES DRIVE, #7 4602 CARLTON DUNES DRIVE, #7 Address: City-St-Zip: FERNANDINA BEACH, FL 32034 US City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: SD Title: () Delete (X) Change ( ) Addition Name: ROSS, ROBERT A Name: ROSS, JANET

4602 CARLTON DUNES DRIVE, #7 4602 CARLTON DUNES DRIVE, #7 Address: Address: FERNANDINA BEACH, FL 32034 US FERNANDINA BEACH, FL 32034 US City-St-Zip: City-St-Zip:

Title: Title: () Delete ( ) Change (X) Addition

ROSS, ROBERT Name: Name:

4602 CARLTON DUNES DR., APT 7 Address Address: City-St-Zip: City-St-Zip: FERNANDINA BEACH, FL 32034 US

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT ROSS **PRES** 04/21/2007