

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000045837

FILED
Feb 08, 2012
Secretary of State

Entity Name: KEYSTONE INSURANCE COMPANY

Current Principal Place of Business:

8543 GUNN HWY
ODESSA, FL 33556

New Principal Place of Business:

8305 GUNN HWY
TAMPA, FL 33626

Current Mailing Address:

7507 HUMBOLDT AVE.
NEW PORT RICHEY, FL 34655

New Mailing Address:

8305 GUNN HWY
TAMPA, FL 33626

FEI Number: 27-0267220

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, DAVID L
8520 GOVERNMENT DR., SUITE 2
NEW PORT RICHEY, FL 34654 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: PRES
Name: ANDERSON, SAMANTHA
Address: 7507 HUMBOLDT AVE.
City-St-Zip: NEW PORT RICHEY, FL 34655

I hereby 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 all other like empowered.

SIGNATURE: SAMANTHA ANDERSON

PRES

02/08/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date