

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 05, 2001 8:00 am
Secretary of State

02-05-2001 90128 034 ***150.00

DOCUMENT # P93000055426

1. Entity Name

KEYSTONE REAL ESTATE GROUP, INC.

Principal Place of Business

~~2911 TIMBER KNOLL DRIVE~~
~~VALRICO FL 33594~~
US

Mailing Address

~~2911 TIMBER KNOLL DRIVE~~
~~VALRICO FL 33594~~
US

2. Principal Place of Business

1106 Linford Ct.
Suite, Apt. #, etc.

3. Mailing Address

1106 Linford Ct.
Suite, Apt. #, etc.

City & State

Valrico FL

City & State

Valrico FL

4. FEI Number

59-3417780

Applied For

Not Applicable

Zip

Country

33594 USA

Zip

Country

33594 USA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BELL, JEFFERY S
~~2911 TIMBER KNOLL DRIVE~~
VALRICO FL 33594

7. Name and Address of New Registered Agent

Name: Jeffery S. Bell
Street Address (P.O. Box Number is Not Acceptable):
1106 Linford Court
City: Valrico FL Zip Code: 33594

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PTS	<input type="checkbox"/> Delete
NAME	BELL, JEFFERY S	
STREET ADDRESS	2911 TIMBER KNOLL DRIVE	
CITY-ST-ZIP	VALRICO FL 33594	
TITLE	V	<input type="checkbox"/> Delete
NAME	BELL, RONALD V	
STREET ADDRESS	2623 BERRY FIELD PLACE	
CITY-ST-ZIP	VALRICO FL 33594	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PTS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jeffery S. Bell	
STREET ADDRESS	1106 Linford Court	
CITY-ST-ZIP	Valrico FL 33594	
TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Ronald V. Bell	
STREET ADDRESS	2548 Regal River Road	
CITY-ST-ZIP	Valrico FL 33594	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/1/01 813-681-1112

CR2E034 (10/00)