

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000011430

Entity Name: KEYSTONE ARMS CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**13105 IXORA COURT
108
NORTH MIAMI, FL 33181**Current Mailing Address:**13105 IXORA COURT
108
NORTH MIAMI, FL 33181**FEI Number: NOT APPLICABLE****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HERNANDEZ, MAGDA DPT
13105 IXORA COURT
108
NORTH MIAMI, FL 33181 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title TREASURER
Name HERNANDEZ, MAGDA
Address 13105 IXORA COURT
 312
City-State-Zip: NORTH MIAMI FL 33181

Title DIRECTOR
Name STEINBERG, KATHERINA
Address 13105 IXORA COURT 309
City-State-Zip: NORTH MIAMI FL 33181

Title SECRETARY
Name HOFFMASTER, LARRY
Address 13105 IXORA COURT 300
City-State-Zip: NORTH MIAMI FL 33181

Title VP
Name STEINBERG, JAY
Address 13105 IXORA COURT 110
 309
City-State-Zip: NORTH MIAMI FL 33181

Title PRESIDENT
Name TRUJILLO, ROMEO
Address 130105 IXORA COURT #115
City-State-Zip: NORTH MIAMI FL 33181

Title DIRECTOR
Name RICHARD, MARIE
Address 13105 IXORA COURT 105
City-State-Zip: NORTH MIAMI FL 33181

Title DIRECTOR
Name SHRADER, MARK
Address 13105 IXORA COURT 218
City-State-Zip: NORTH MIAMI FL 33181

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MAGDA HERNANDEZ**TREASURER****02/03/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date