

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000001077

**Entity Name:** BROTHER KEILY PLACE, INC.

**Current Principal Place of Business:**

1603 NW 7TH AVENUE  
MIAMI, FL 33136

**Current Mailing Address:**

1603 NW 7TH AVENUE  
MIAMI, FL 33136

**FEI Number: 26-2449799**

**Certificate of Status Desired: No**

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

FITZGERALD, J PATRICK ESQ.  
J PATRICK FITZGERALD & ASSOCIATES, PA  
110 MERRICK WAY, SUITE 3-B  
CORAL GABLES, FL 33134 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: J PATRICK FITZGERALD**

**02/01/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name MACPHEE, RICHARD  
Address 26 GRANT AVENUE SOUTH  
City-State-Zip: HAMILTON, ONTARIO CA L8N2X

Title D  
Name FENZA, MATTHEW  
Address 680 NE 52 STREET  
City-State-Zip: MIAMI FL 33137

Title TSD  
Name HILL, THOMAS  
Address 901 BROTHER MATHIAS PLACE  
City-State-Zip: ALBUQUERQUE NM 87103

Title D  
Name OSORIO, THOMAS  
Address 705 BEECHWOOD DRIVE  
City-State-Zip: DEPTFORD NJ 08096

*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: RICHARD MACPHEE**

**PD**

**02/01/2023**

Electronic Signature of Signing Officer/Director Detail

Date