

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N32963

**Entity Name:** KEYS GATE CONDOMINIUM NO. FOUR ASSOCIATION, INC.

**FILED**  
**Apr 24, 2020**  
**Secretary of State**  
**4574041095CC**

**Current Principal Place of Business:**

1541 SE 12 AVE  
SUITE # 37  
HOMESTEAD, FL 33034

**Current Mailing Address:**

1541 SE 12 AVE  
SUITE # 37  
HOMESTEAD, FL 33034 US

**FEI Number: 65-0172374**

**Certificate of Status Desired: No**

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

SKLRD, INC  
201 ALHAMBRA CIRCLE - STE. 1102  
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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            THOMPSON, ZITA  
Address        1541 SE 12 AVE, SUITE # 37  
City-State-Zip: HOMESTEAD FL 33034

Title            T  
Name            CANARY, CHERRY TREASUR  
Address        1541 SE 12 AVE, SUITE # 37  
City-State-Zip: HOMESTEAD FL 33034

Title            SECRETARY  
Name            CRAY KELLY , KATHLEEN  
Address        1541 SE 12 AVE  
                 SUITE # 37  
City-State-Zip: HOMESTEAD FL 33034

Title            DIRECTOR  
Name            TETRICK, CHRISTINE  
Address        1541 SE 12 AVE  
                 SUITE # 37  
City-State-Zip: HOMESTEAD FL 33034

Title            DIRECTOR  
Name            PADILLA, CLARA  
Address        1541 SE 12 AVE  
                 SUITE # 37  
City-State-Zip: HOMESTEAD FL 33034

*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: ZITA THOMPSON**

**PRESIDENT**

**04/24/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date