#### 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N32963

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

# **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

## 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

### **Officer/Director Detail :**

	Title	TREASURER	Title	SECRETARY
	Name	CRAY KELLY , KATHLEEN	Name	SILVA, NYREE
	Address	1541 SE 12 AVE SUITE # 37	Address	1541 SE 12 AVE SUITE # 37
	City-State-Zip:	HOMESTEAD FL 33034	City-State-Zip:	HOMESTEAD FL 33034
	Title	PRESIDENT	Title	VP
	Name	GIRALDO, CLARA	Name	MAYS, LUELLA
	Address	1541 SE 12 AVE	Address	1541 SE 12 AVE
	City-State-Zip:	SUITE # 37 HOMESTEAD FL 33034	City-State-Zip:	HOMESTEAD FL 33034
	Title	DIRECTOR		
	Name	THOMPSON, ZITA		
	Address	1541 SE 12TH AVE STE 37		

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: CLARA GIRALDO

City-State-Zip: HOMESTEAD FL 33035

PRESIDENT

01/24/2024 Date

Electronic Signature of Signing Officer/Director Detail

Date

# FILED Jan 24, 2024 Secretary of State 1864870074CC

Certificate of Status Desired: No