

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 08, 2002 8:00 am
Secretary of State

05-08-2002 90088 049 ***150.00

DOCUMENT # 250357

1. Entity Name
KEEN'S CORNER INC.

Principal Place of Business
32700 US HIGHWAY 19 N.
PALM HARBOR FL 34684

Mailing Address
32700 US HIGHWAY 19 N.
PALM HARBOR FL 34684

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-0935585**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, 2002 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME **CEOD**
 STREET ADDRESS **PLANES, WILLIAM**
 CITY-ST-ZIP **854 CYPRESS LAKEVIEW COURT**
TARPON SPRINGS FL 34689

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **SD**
 STREET ADDRESS **KEEN, JAMES W**
 CITY-ST-ZIP **3530 NW 89TH WAY**
HOLLYWOOD FL 33024

TITLE ☒ Change ☐ Addition
 NAME **Director**
 STREET ADDRESS **James W. Keen**
 CITY-ST-ZIP **3530 NW 89th Way**
Hollywood, FL 33024

TITLE ☐ Delete
 NAME **ASD**
 STREET ADDRESS **WHITE, LANGFRED W**
 CITY-ST-ZIP **2094 ASHBURY DRIVE**
CLEARWATER FL 33764

TITLE ☒ Change ☐ Addition
 NAME **Dir - Secy**
 STREET ADDRESS **Langfred W. White**
 CITY-ST-ZIP **2094 Ashbury Drive**
Clearwater, FL 33764

TITLE ☐ Delete
 NAME **TC**
 STREET ADDRESS **NOLL, DEBORAH**
 CITY-ST-ZIP **4168 AMBER LANE**
PALM HARBOR FL 34685

TITLE ☒ Change ☐ Addition
 NAME **Asst Secy-Treas-Contr**
 STREET ADDRESS **Deborah Noll**
 CITY-ST-ZIP **4168 Amber Lane**
Palm Harbor, FL 34685

TITLE ☐ Delete
 NAME **SVP**
 STREET ADDRESS **PLANES, REGINA M**
 CITY-ST-ZIP **854 CYPRESS LAKEVIEW COURT**
TARPON SPRINGS FL 34689

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **P**
 STREET ADDRESS **TAMMARO, ERNEST A**
 CITY-ST-ZIP **6375 LONG KEY LANE**
BOYNTON BEACH FL 33437

TITLE ☐ Change ☐ 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

4/24/2002 727-781-9885
 Date Daytime Phone #

CR2E034 (9/01)

ATTACHMENT TO 2002 UNIFORM BUSINESS REPORT OF KEEN'S CORNER,
INC. - DOCUMENT #250357 1651401

BLOCK 11

BLOCK 12

Vice President
William Planes II
4775 Collins Avenue, #1505
Miami Beach, FL 33140