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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 258011

1 (6)

Mailing Address

KETO, INC.

Principal Place of Business

% A.S. KEITH JR. % A.S. KEITH JR. 708 POWELL DRIVE 708 POWELL DRIVE FT. WALTON BEACH FL 32547 FT. WALTON BEACH FL 32547-1760 3. Date Incorporated or Qualified 3a. Date of Last Report 04/16/1962 06/14/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-1003451 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, 24 29 25 30 Florida Statutes Yes **☑** No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PENTEL, ROBERT MRS 20 OPEN GULF ST. **B2** Street Address (P.O. Box Number is Not Acceptable) **DESTIN FL 32541** 83 City Zip Code 85 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title Tapplicable 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1811.6 DELETE 1.1 TITLE ☐ Change ___ Addition TODD, WILLIAM W 1.2 NAME 4454 HICKORY SHORES BLVD STREET ADDRESS 1.3 STREET ADDRESS GULF BREEZE FL CITY-ST-7P 1.4 CITY-ST-ZIP TD DELETE THILE 2.1 TITLE Change Addition KEITH, ALEX S NAME 2.2 NAME 708 POWELL DRIVE STREET ADDRESS 23 STREET ADDRESS FT. WALTON BEACH FL CITY-ST-7:P 2 4 CITY-SY-ZIP TITLE DELETE 3.1 TITLE Change Addition NAME PENTEL, ROBERT MRS 3.2 NAME 20 OPEN GULF ST STREET ADDRESS 3.3 STREET ADDRESS **DESTIN FL 32541-4122** CITY-ST-ZIF 3.4. CITY - ST- ZIP DELETE THE Change 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-SI-ZIF 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE ☐ Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS COY-\$1-20 5.4 CITY - ST - ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. I do 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 annual report or supplemental annual 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

FILED Feb 14 1997 8:00am Secretary of State