2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 578305

1. Entity Name
O'KEEFE ARCHITECTS, INC.

Principal Place of Business	Mailing Address
2424 CURLEW RD PALM HARBOR, FL 34683 US	2424 CURLEW RD PALM HARBOR, FL 34683 US

DO NOT WRITE IN THIS SPACE

01112008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
59-1822001	Not Applicable

5. Certificate of Status Desired   ☐   **$8.75** Additional Fee Required

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6. Name and Address of Current Registered Agent

OKEEFE, DENNIS E.
2424 CURLEW RD
PALM HARBOR, FL 34683

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE_____

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution.   ☐   **$5.00** May Be Added to Fees

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10.   OFFICERS AND DIRECTORS

TITLE	STD
NAME	FASSNACHT, JERRY
STREET ADDRESS	1115 ELMENDORF TR
CITY-ST-ZIP	TARPON SPRINGS, FL 34689

TITLE	PD
NAME	O'KEEFE, DENNIS E.
STREET ADDRESS	1226 WEYBRIDGE LN
CITY-ST-ZIP	DUNEDIN, FL 34698

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/30/08-80059-001 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ DENNIS OKEEFE _____ 4/29/08 _ 727-781-5585

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #