

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 23, 2008 8:00 am
Secretary of State

05-23-2008 90022 046 ****70.00

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1. Entity Name

KEYES-KANTER-PARKER WAREHOUSE ASSOCIATION, INC.



Principal Place of Business

14352 SW 142ND AVENUE
MIAMI FL 33186

Mailing Address

C/O BILL EISNOR, INC MGR
14352 SW 142ND AVE
MIAMI FL 33186
US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2380522

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/07)



6. Name and Address of Current Registered Agent

EISNOR, WILLIAM J SR
14352 SW 142ND AVENUE
MIAMI FL 33186

7. Name and Address of New Registered Agent

Name

Mary Lou Edelstein

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

2720 Country Club Prado

City

Coral Gables

FL

Zip Code

33134

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

4/28/08

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME EDELSTEIN, MARY LOU
STREET ADDRESS 1238 ANASTASIA AVE.
CITY-ST-ZIP CORAL GABLES FL 33186

TITLE DST ☐ Delete
NAME LOUISE A. EISNOR,
STREET ADDRESS 14352 S.W. 142 AVENUE
CITY-ST-ZIP MIAMI FL 33186

TITLE VPD ☒ Delete
NAME ECKEL, GISELA
STREET ADDRESS 14238-40 SW 139 CT.
CITY-ST-ZIP MIAMI FL 33186

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE Vice-President ☐ Change ☒ Addition
NAME William John Eisnor, Jr.
STREET ADDRESS 101 San Juan Drive
CITY-ST-ZIP Islamorada, Fla. 33036

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 617, 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: *Louise A. Eisnor* LOUISE A. EISNOR

4/28/08

305-448-3991