

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # F16335

1. Entity Name
KELLER & ASSOCIATES, INC.



Principal Place of Business
2810 SECURITY LANE
LAKELAND, FL 33803

Mailing Address
2810 SECURITY LANE
LAKELAND, FL 33803

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

02272007

Chg-P

CR2E034 (12/06)

4. FEI Number

59-2019110

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KELLER, TED L
2810 SECURITY LANE
LAKELAND, FL 33803

7. Name and Address of New Registered Agent

Name *Keller, Hubble C.*

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

2810 Security Lane

City *Lakeland*

FL

Zip Code *33803*

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]

Hubble C. Keller President

3-1-07

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DP ☐ Delete
NAME KELLER, TED L
STREET ADDRESS 6824 BROKEN ARROW TR S.
CITY-ST-ZIP LAKELAND, FL 33813

TITLE V ☐ Delete
NAME KELLER, HUBBLE C
STREET ADDRESS 2810 SECURITY LANE
CITY-ST-ZIP LAKELAND, FL 33803

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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 11

TITLE Director ☒ Change ☐ Addition
NAME *Keller Ted L*
STREET ADDRESS *6824 Broken Arrow Tr S.*
CITY-ST-ZIP *Lakeland FL 33813*

TITLE President ☒ Change ☐ Addition
NAME *Keller, Hubble C.*
STREET ADDRESS *15286 Erans Ranch Rd.*
CITY-ST-ZIP *Lakeland, FL 33809*

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

TITLE ☐ Change ☐ Addition
NAME *\$736*
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME *100091533201*
STREET ADDRESS *03/07/07--01004--009 **70.00*
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 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:

[Signature] *Hubble C. Keller*

3-1-07 *863-665-9229*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #