

**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**FILED**

**May 08 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # F41050 (8)**  
 1. Corporation Name  
**KEITH-KAREN CORPORATION**



Principal Place of Business 3514 SE 2ND PLACE CAPE CORAL FL 33904	Mailing Address 3514 SE 2ND PLACE CAPE CORAL FL 33904
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 3514 SE 2nd PLACE Suite, Apt. #, etc.		2a. Mailing Address 26 3514 SE 2nd PLACE Suite, Apt. #, etc.		3. Date Incorporated or Qualified 08/13/1981	
22 City & State 23 CAPE CORAL, FL.		27 City & State 28 CAPE CORAL, FL.		4. FEI Number 59-2116027 Applied For <input type="checkbox"/> Not Applicable	
24 33904 25 U.S.A.		29 33904 30 U.S.A.		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
**MILLER, GLORIA**  
 3514 SE 2ND PLACE  
 CAPE CORAL FL 33904

10. Name and Address of New Registered Agent  
 81 Name **MILLER, GLORIA**  
 82 Street Address (P.O. Box Number is Not Acceptable)  
**3514 S.E. 2nd PLACE**  
 83 **CAPE CORAL, FL.**  
 84 City **CAPE CORAL** FL 85 Zip Code **33904**

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 *Gloria J. Miller* **Gloria J. Miller, President** 4-30-98  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	<b>S</b> <input type="checkbox"/> DELETE
NAME	<b>MILLER, FRED L</b>
STREET ADDRESS	<b>3514 S.E. 2ND PLACE</b>
CITY-ST-ZIP	<b>CAPE CORAL FL</b>
TITLE	<b>P</b> <input type="checkbox"/> DELETE
NAME	<b>MILLER, GLORIA J</b>
STREET ADDRESS	<b>3514 SE 2ND PLACE</b>
CITY-ST-ZIP	<b>CAPE CORAL FL</b>
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.  
 SIGNATURE: *Gloria J. Miller* **Gloria J. Miller, President** 4-30-98 (941) 542-1139

CR2E034 (10/97)