

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 22, 1999 8:00 am
Secretary of State

04-22-1999 90207 036 ***150.00

DOCUMENT # G76488

1. Corporation Name
THE KEENAN CORPORATION

Principal Place of Business
8609 66TH STREET NORTH
PINELLAS PARK FL 34666-4527

Mailing Address
8609 66TH STREET NORTH
PINELLAS PARK FL 34666-4527

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/27/1983

4. FEI Number
59-2351640

Applied For
Not Applicable

2. Principal Place of Business
21 16895 FIRST ST E
Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 City & State
23 N. Redington Bch, FL

24 Zip 33708-1418 25 Country USA

27 Same as # 2.

28 City & State

29 Zip 33708-1418 30 Country USA

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

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

KEENAN, JEAN E.
8609 66TH STREET NORTH
PINELLAS PARK FL 33565

10. Name and Address of New Registered Agent

81 Name Keenan, Jean E.
82 Street Address (P.O. Box Number is Not Acceptable) 16895 FIRST ST E
83 N Redington Bch
84 City FL 85 Zip Code 33708

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 if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME KEENAN, JEAN E.
STREET ADDRESS 8609 66TH STREET NORTH
CITY-ST-ZIP PINELLAS PARK FL

TITLE V
NAME KEENAN, R.K.
STREET ADDRESS 8609 66TH STREET, NORTH
CITY-ST-ZIP PINELLAS PARK FL

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 16895 FIRST ST E
1.4 CITY-ST-ZIP N Redington Bch, FL 33708-1418

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 16895 FIRST ST E
2.4 CITY-ST-ZIP N Redington Bch, FL 33708-1418

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7257-
544-2594
Jean E. Keenan

4-14-99