## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 22, 2008 08:00 AN Secretary of State

	ANNUAL	REPORT	
DOCUMENT#	J20149		

Principal Place of Business

1. Entity Name

Mailing Address

1900 W COMMERCIAL BLVD, SUITE 200 FT. LAUDERDALE, FL 33309-3018

KEENAN PROPERTIES, INC.

1900 W COMMERCIAL BLVD, SUITE 200 FT. LAUDERDALE, FL 33309-3018



03112008

No Chg-P

CR2E034 (11/05)

4. FEI Number
65-0001897 Applied For
Not Applicable

5. Certificate of Status Desired 
Fee Required
Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

BOYLE, CONRAD J., ESQ 500 E. BROWARD BLVD. STE 1950

FT. LAUDERDALE, FL 33394

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the plants of registered agent.	ourpose of changing its registered office o	r registered agent, or bo	th, in the State of Florida. I am familiar with, and accep
SIGNATURE	Signature typed or printed name of registered agent and little	if applicable (NOTE, Registered Agent signal	ure required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	U00000913504 05/08/08-80019-002 150.00
10.	OFFICERS AND DIRECTORS			
TITLE	STD			
NAME	KEENAN, WILLIAM			
STREET ADDRESS	ESS   1900 W. COMMERCIAL BLVD., STE 200			
CITY-ST-ZIP	-ZIP FORT LAUDERDALE, FL 33309			

## CHYNOWETH, DALE NAME STREET ADDRESS 1900 W. COMMERCIAL BLVD., STE 200 CITY-ST-ZIP FORT LAUDERDALE, FL 33309 **VPAO** TITLE HOGUE, CHANTAL NAME STREET ADDRESS 1900 W COMMERCIAL BLVD., SUITE 200 FORT LAUDERDALE, FL 33309 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

## DO NOT WRITE IN THIS SPACE

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 chapter 607, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS
CITY-S1-ZIP
TITLE
NAME
STREET ADDRESS
CITY-S1-ZIP

TITLE

RTURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

March 31, 2008

(954) 776-6700

Date

Daytime Phone #