FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999

DOCUMENT # N9400003554

- Corporation Number

THE FRED AND ROSE KELLER FOUNDATION, INC.

Principal Place of Business	
6758 N MILITARY TRL	
SUITE 301	
WEST PALM BEACH FL 33407	
HS	

2. Principal Place of Business

Suite, Apt. #, etc.

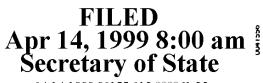
22

Mailing Address 6758 N MILITARY TRL SUITE 301 WEST PALM BEACH FL 33407

Suite, Apt. #, etc.

2a. Mailing Address

US



04-14-1999 90177 012 ****61.25

1				

3. Date Incorporated or Qualifed

07/19/1994 4. FEI Number

65 05 10942

City & State		City & State			5. Certifcate of Status Desired		\$ 8.75 Ad Fee Req	
23	<u> </u>	28	0					
— Zip	Country	Zip	Country		6. Election Campaign Financing		\$5.00 N Added to	
24	25	29	30		Trust Fund Contribution	la minta and d		rees
	9. Name and Address of Current	Registered Agent	81	Name	10. Name and Address of New F	redistered y	-gent	
			51	Name				
KELLER, F	RED		82	Street Ad	dress (P.O. Box Number is Not Accepta	able)	•	
6758 N MILITARY TRL				<u> </u>				
SUITE 301			83					.
	M BEACH FL 33407		84	City			85 Zip C	ode
			-			FL		
office or r	to the provisions of Sections 617.0502 egistered agent, or both, in the State om familiar with, and accept the obligati	f Florida. Such change was	s authorized by	the corpora	rporation submits this statement for the tion's board of directors. I hereby accept	purpose of ot the appoir	changing its r ntment as regi	egistered stered
SIGNATURE	Signature, typed or printed name of registered agent	and title if annihinghile (NC	TF: Registered Age	nt signature requ	Ired when reinstating)	DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OF		D DIRECTOR	S IN 12
TITLE	D	DELETE	1,1 TITLE				Change	Addition
NAME	KELLER, FRED		1.2 NAME			•		
STREET ADDRESS	ATTO AL ARRITADIV TOL. CHITT OF	1	1.3 STREE	T ADDRESS			ý.	
	WEST PALM BEACH FL 33407	•	1.4 CITY-S					
CITY-ST-ZIP	D	☐ DELETE	2.1 TITLE	11-21			☐ Change	☐ Addition
	KELLER, ROSEMARIE		2.2 NAME					
NAME	6758 N. MILITRY TRL, SUITE 301			TADORESS				İ
_STREET ADDRESS	WEST PALM BEACH FL 33407		2.4 CITY-		•	هم شراحه	•	. {
CITY-ST-ZIP	D	☐ DELETE	3.1 TITLE	31-211			Change	Addition
TITLE	_	D 2012.10	3.2 NAME				-	1
NAME	KEIL, WOLFGANG			TADDDEGO				1
STREET ADDRESS		11		T ADDRESS				
CITY-ST-ZIP	WEST PALM BEACH FL 33407	□ DELETE	3.4. CITY-	ST-ZIP			Change	Addition
TITLE		☐ DELETE	4.1 TITLE	1			C) circuigo	٠,٠٠٠٠٠١
NAME			4, 2 NAME					
STREET ADDRESS			4.3 STREE	TADDRESS				
CITY-ST-ZIP			4.4 CITY-5	T-ZIP			CT Character	☐ Addition
TITLE		☐ DELETE	5.1 TITLE				Change	☐ Addition
NAME			5.2 NAME	1				Ì
STREET ADDRESS				TADDRESS	•			
CITY-ST-ZIP* *	# 4분발 소설량, 18명1		5.4 CITY-5	ST-ZIP				
TITLE YOU THE		☐ DELETE	6.1 TITLE		· · · · · · · · · · · · · · · · · · ·		☐ Change	Addition
NAME :			6.2 NAME	.]		•		
STREET ADDRESS	,		6.3 STREE	TADDRESS				
CITY-ST-78P	, ,		6.4 CITY-5					
14. I hereby	certify that the information supplied with	this filing does not qualify	for the exemp	tion stated in	Section 119.07(3)(i), Florida Statutes.	i further cer	tify that the in	formation

I hereby certify that the information supplied with this filing don't not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio indicated on this annual report or supplemental innual 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 of trusted empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachaptent with an address, with all other like empowered.

SIGNATURE:

SIG NATURE IN FICURES EMALIE KELLER 4-7-99 SG/1845-991/
SMATURE AND TYPED OR PRINTED NAME OF SIGNING OFFISER OR DIRECTOR

Dayture Phone #

_CR2E037 (11/98)

Applied For

Not Applicable