2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000097684

Entity Name: KELLER ORENDER INCORPORATED

FILED Apr 14, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Finicipal Flace of Dusiness.	New Fillicipal Flace of Dusiliess.

484 SE FAIRCHILD AVE. PORT ST. LUCIE, FL 34984

Current Mailing Address: New Mailing Address:

484 SE FAIRCHILD AVE. 10302 S. FEDERAL HWY
PORT ST. LUCIE, FL 34984 #129
PORT ST. LUCIE, FL 34952

FEI Number: 65-1077032 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TAYLOR, KEITH R

1143 N. LOYLE AVE.
CRYSTAL RIVER, FL 34429 US

TAYLOR, KEITH R

P.O. BOX 975
CRYSTAL RIVER, FL 34423 US

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.

SIGNATURE: 04/14/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST () Delete Title: () Change () Addition Name: ORENDER, KELLER R JR Name:

 Name:
 ORENDER, KELLER R JR
 Name:

 Address:
 484 SE FAIRCHILD AVE.
 Address:

 City-St-Zip:
 PORT ST. LUCIE, FL 34984
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KELLER ORENDER JR DPST 04/14/2004