

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000006916

FILED
Apr 29, 2008
Secretary of State

Entity Name: KEENANM MULTI-SERVICES CENTER INC.

Current Principal Place of Business:

1360 45TH ST
ORLANDO, FL 32839

New Principal Place of Business:

Current Mailing Address:

1360 45TH ST
ORLANDO, FL 32839

New Mailing Address:

FEI Number: 01-0607884

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GEORGES, ALFRED P
Address: P.O. BOX 451034
City-St-Zip: KISSIMMEE, FL 34745

Title: D () Delete
Name: GEORGES, MICHAELLE L
Address: 133 BURRELL CIRCLE
City-St-Zip: KISSIMMEE, FL 34744

Title: O () Delete
Name: GEORGES, ALFRED M
Address: 133 BURRELL CIRCE
City-St-Zip: KISSIMMEE, FL 34744

Title: O () Delete
Name: GEORGES, ELIZABETH A
Address: 133 BURRELL CIRCLE
City-St-Zip: KISSIMMEE, FL 34744

Title: O () Delete
Name: TOUZANI, FATIMAZAHRA
Address: 1360 45TH ST
City-St-Zip: ORLANDO, FL 32839

Title: O () Delete
Name: SYLVAIN, LAGUERRE
Address: 1360 45TH ST
City-St-Zip: ORLANDO, FL 32839

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: O (X) Change () Addition
Name: ERNESTINA, CABRERA
Address: 1360 45TH ST
City-St-Zip: ORLANDO, FL 32839

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ALFRED P. GEORGES

D

04/29/2008

Electronic Signature of Signing Officer or Director

Date