

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 12, 2007 08:00 A**  
**Secretary of State**

DOCUMENT # P03000098721

1. Entry Name  
TKG INVESTMENTS, INC.



Principal Place of Business  
2652 VENETIAN WAY  
GULF BREEZE, FL 32563

Mailing Address  
2652 VENETIAN WAY  
GULF BREEZE, FL 32563



02082007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
54-2124749

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

KEENAN, SHAWN P  
2652 VENETIAN WAY  
GULF BREEZE, FL 32563

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when registering)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

TITLE	P, T
NAME	KEENAN, SHAWN P
STREET ADDRESS	2652 VENETIAN WAY
CITY- ST- ZIP	GULF BREEZE, FL 32563
TITLE	VP
NAME	KEENAN, ADAM W
STREET ADDRESS	3880 HIDDEN OAK DR
CITY- ST- ZIP	PENSACOLA, FL 32504
TITLE	VP
NAME	KEENAN, DON L
STREET ADDRESS	3880 HIDDEN OAK DR
CITY- ST- ZIP	PENSACOLA, FL 32504
TITLE	S
NAME	KEENAN, JENNIFER L
STREET ADDRESS	2652 VENETIAN WAY
CITY- ST- ZIP	GULF BREEZE, FL 32563
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

U00000631287  
02/20/07-80041-025 150.00

**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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Shawn P. Keenan* Shawn P Keenan, Pres

2/8/07 850 916 9704

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Organization #