

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000078295

Entity Name: KEELY FELL, INC.

FILED
Oct 24, 2005
Secretary of State

Current Principal Place of Business:

4594 NAUTICAL COURT
DESTIN, FL 32541

New Principal Place of Business:

36150 EMERALD COAST PARKWAY
SUITE 102
DESTIN, FL 32541

Current Mailing Address:

4594 NAUTICAL COURT
DESTIN, FL 32541

New Mailing Address:

36150 EMERALD COAST PARKWAY
SUITE 102
DESTIN, FL 32541

FEI Number: 20-0988732

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

FELL, MICHAEL F VP
1216 LAKESHORE DRIVE
NICEVILLE, FL 32578 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: MICHAEL F. FELL

10/24/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FELL, KEELY
Address: 4594 NAUTICAL COURT
City-St-Zip: DESTIN, FL 32541

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FELL, KEELY M PD
Address: 36150 EMERALD COAST PARKWAY
City-St-Zip: DESTIN, FL 32541

Title: VP () Change (X) Addition
Name: FELL, MICHAEL M VP
Address: 1216 LAKESHORE DRIVE
City-St-Zip: NICEVILLE, FL 32578

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: KEELY M. FELL

PD

10/24/2005

Electronic Signature of Signing Officer or Director

Date