


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2008 8:00 am
Secretary of State

04-08-2008 90014 021 ***150.00

DOCUMENT # P05000037832 1. Entity Name KELLER SERVICES INC.					
Principal Place of Business 2064 RIDGECREST DRIVE DUNEDIN, FL 34698			Mailing Address 2064 RIDGECREST DRIVE DUNEDIN, FL 34698		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip Country		City & State Zip Country		4. FEI Number 02-0741805 Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				03172008 Chg-P CR2E034 (12/06)	
6. Name and Address of Current Registered Agent ATA REGISTERED AGENT INC. 5647 110TH AVE NORTH ROYAL PALM BEACH, FL 33411-0000			7. Name and Address of New Registered Agent Name Dave BRENNAN Street Address (P.O. Box Number is Not Acceptable) 755 Indian Rocks Rd City BELLEAIR BLUFFS FL Zip Code 33770		
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: <i>[Signature]</i> DATE: 3/27/08 <small>(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating))</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KELLER, KYLE 2064 RIDGECREST DRIVE DUNEDIN, FL 34698 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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: <i>[Signature]</i> Kyle Keller (President) 4/3/08 (727) 734-8361 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					