2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000051128

1. Entity Name
CAROLE KEANE P.A. INC.

Principal Place of Business	Mailing Address
1528 MARSH RABBIT WY	1528 MARSH RABBIT WY
ORANGE PARK, FL 32003	ORANGE PARK, FL 32003

DO NOT WRITE IN THIS SPACE

03312008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
20-2724907	Not Applicable

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

6. Name and Address of Current Registered Agent

KEANE, CAROLE L
3134 TURTLE DOVE TR
DELAND, FL 32724

1528 Marsh Rabbit Way Orange Park, FL 32003

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 *Carole L. Keane P.A. Inc.*   DATE *4-3-08*

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PSTV
NAME	KEANE, CAROLE L
STREET ADDRESS	3134 TURTLE DOVE TR *1528 Marsh Rabbit Way*
CITY-ST-ZIP	DELAND, FL 32724 *Orange Park, FL 32003*

TITLE	
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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: *Carole L. Keane PA*   Date *4-3-08*   Daytime Phone # *904-625-2922*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR