## P05000098237

(Re	equestor's Name)		
(Address)			
(Ad	ldress)		
(Cit	ty/State/Zip/Phon	e #)	
PICK-UP	WAIT	MAIL	
(Bu	siness Entity Nar	me)	
(Document Number)			
Certified Copies	Certificates	s of Status	
Special Instructions to Filing Officer:			

Office Use Only



500086414205

01/29/07--01057--028 \*\*35.00

RAWCY

FILED

07 JAN 29 AM II: 31

SECRETARY OF STATE
AT LAHASSEE, FLORIDA

## COVER LETTER

TO:	Amendment Section Division of Corporations			
SUBJ	ECT: McKeehen Enterprises Incorporat	ed		
	(Name of Co	rporation)		
DOC	UMENT NUMBER: P05000098237			
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
		C		
	Nancy McKeehen, President			
(Name of Contact Person)				
	McKeehen Enterprises Incorpor	rated		
	(Firm/Cor	mpany)		
6802 Shimmering Drive				
	(Addre	ess)		
	Lakeland, FL 33813			
	(City/State and	d Zip Code)		
For fu	rther information concerning this matter, please ca	all:		
	<b>5</b> /1			
Nancy McKeehen, President (Name of Contact Person)  at (863) (Area Code & Daytime Telephone Num				
	(Name of Contact Person)	(Area Code & Daytime Telephone Number)		
Enclos	sed is a \$35.00 check made payable to the Departm	nent of State.		
	Mailing Address:	Street Address: Amendment Section		
	Amendment Section			
	Division of Corporations	Division of Corporations		
	P.O. Box 6327	Clifton Building		
	Tallahassee, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

TO:

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	ange is submitted for a corporation org	502, 607.1508, or 617.1508, Florida Statutes, this anized under the laws of the State of Florida stered agent, or both, in the State of Florida.	
1. The name of	the corporation: McKeehen Enterprise	s Incorporated	
	l office address: 4525 S. Florida Avenu		
3. The mailing	address (if different): 6802 Shimmerin	g Drive, Lakeland, FL 33813	
4. Date of incom	rporation/qualification: 07/13/2005	Document number: P05000098237	
	nd street address of the current registered artment of State:	agent and registered office on file with the	
	Ronald L. McKeehen	TLCA 7 JA	
	455 Motorcoach Drive S.		
	Polk City, FL 33868	SEP 3	
6. The name an (if changed):		SECRETARY OF STATE AHASSEE, FLORIDA gent (if changed) and /or registered office	
	Nancy McKeehen		
	6802 Shimmering Drive		
	(P.O. Box NOT accepta	ble)	
_	ress of its registered office and the stre	eet address of the business office of its registered agent, oted by its board of directors or by an officer so notified in writing of the change.	
hancy McKeehen (Signature of an officer or director)		Nancy McKeehen, President (Printed or typed name and title)	
I hereby accept further agree of my duties, a document is be corporation ha	ot the appointment as registered agent to comply with the provisions of all s and I am familiar with and accept the c eing filed merely to reflect a change in as been notified in writing of this chan	and agree to act in this capacity, tatutes relative to the proper and complete performance bligation of my position as registered agent. Or, if this the registered office address, I hereby confirm that the ge.	
	y McKeehen	01/15/2007	
	Signature of Registered Agent)	(Date)	
rr signing on c	ehalf of an entity:		
	(Typed or Printed Name)		

\* \* \* FILING FEE: \$35.00 \* \* \*