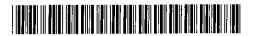
## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 21, 2007 08:00 AM Secretary of State

DOCUMENT # I 1. Entity Name KEETON CORRECTION			
Principal Place of Business		Mailing Address	
5000 W HWY, 98		P.O. BOX 2327	
PANAMA CITY, FL 32401	US	PANAMA CITY, FL 32402	US



## DO NOT WRITE IN THIS SPACE

01192007 No Chg-P CR2E034 (11/05)

4. FEI Number		Applied For
61-1009274		Not Applicable
5 Certificate of Status Desired	\$8.7	75 Additional

6. Name and Address of Current Registered Agent

SLOAN, TIMOTHY J 427 MCKENZIE AVENUE PANAMA CITY, FL 32401

## DO NOT WRITE IN THIS SPACE

				IN	I NIS SPACE
	e named entity submits this statement for the p tions of registered agent.	urpose of changing its register	ed office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and little in	applicable (NOTE, Register)	ed Agent signature	e required when reinstating)	DATE
		Election Campaign Fina     Trust Fund Contribution.		\$5.00 May Be Added to Fees	U00000642388 03/01/07-80042-011 150.00
10.	OFFICERS AND DIREC	TORS		· · · · · · · · · · · · · · · · · · ·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SPENCE, KIMBERLY K 2816 TRACEY LANE PANAMA CITY, FL 32405				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SPENCE, TIMOTHY S 2816 TRACY LANE PANAMA CITY, FL 32405				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN <sup>-</sup>	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		٠. ! ١		••	•
THLE - NAME STREET ADDRESS CITY-ST-ZIP				-	·
indicated	ion this report or suppremental report is true a	nd accurate and that my signa	ture shall hav	re the same legal effec	), Florida Statutes. I further certify that the information it as if made under oath; that I am an officer or director is, and that my name appears in Block 10 or Block 11 if