

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000024605

1. Entity Name

Keenan Fairway Group, Inc.

Principal Place of Business

Mailing Address

1900 West Commercial Blvd.
Suite #200
Fort Lauderdale, FL 33309

1900 West Commercial Blvd.
Suite #200
Fort Lauderdale, FL 33309

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0559998

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Boyle, Conrad J. Esquire
500 East Broward Blvd., #1950
Fort Lauderdale, FL 33394

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Director ☐ Delete
NAME Keenan, Robert D.
STREET ADDRESS 1900 West Commercial Blvd., #200
CITY-ST-ZIP Fort Lauderdale, FL 33309

TITLE Director ☐ Change ☐ Addition
NAME Keenan, Robert D.
STREET ADDRESS 1900 West Commercial Blvd., #200
CITY-ST-ZIP Fort Lauderdale, FL 33309

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

KEENAN FAIRWAY GROUP INC.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

AR SECRETARY.

Date

Daytime Phone #

Apr 24/01

954-776-6700

FILED
01 MAY -3 AM 11: 12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2000-01 UBR

CR2E034 (11/00)