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FILED

Mar 05 1997 8:00am  
Secretary of StatePROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000038080 (5)

1. Corporation Name

KELLER FINANCIAL SERVICES - SERIES XXII, INC.



Principal Place of Business

18167 US HWY 19  
SUITE 450  
CLEARWATER FL 34624  
US

Mailing Address

PO BOX 15007  
CLEARWATER FL 34628-5007  
US

3. Date Incorporated or Qualified

05/20/1994

3a. Date of Last Report

03/25/1996

2. Principal Place of Business

21 18167 US Hwy 19 North

Suite, Apt. #, etc.

22 Suite 450

City &amp; State

23 Clearwater, FL

Zip

24 34624-6572

Country

25 Pinellas

2a. Mailing Address

26 18167 US Hwy 19 North

Suite, Apt. #, etc.

27 Suite 450

City &amp; State

28 Clearwater, FL

Zip

29 34624-6572

Country

30 Pinellas

4. FEI Number

59-3244665

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes☒ Yes☐ No

9. Name and Address of Current Registered Agent

KELLER, BRIAN R  
18167 US HWY 19  
CLEARWATER FL 34624

10. Name and Address of New Registered Agent

81 Name  
Keller, Brian R.82 Street Address (P.O. Box Number is Not Acceptable)  
18167 US Highway 19 North

83 Suite 450

84 City  
Clearwater

FL

85 Zip Code  
34624-6572

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligation of, Section 607.0505, Florida Statutes.

SIGNATURE

Brian R. Keller

January 9, 1997

Signature of registered agent or registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
PS	KELLER, BRIAN R	18167 US HWY 19	CLEARWATER FL 34624	<input type="checkbox"/>
VT	WATKIN, R. LAMAR	18167 US HWY 19	CLEARWATER FL 34624	<input checked="" type="checkbox"/>
D	GILLIS, TIM	18167 US HWY 19	CLEARWATER FL 34624	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
C/S/T/D	Keller, Brian R.	18167 US Highway 19 North, Suite 450	Clearwater, FL 34624-6572	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
V/D	Gillis, Timothy G.	18167 US Highway 19 North, Suite 450	Clearwater, FL 34624-6572	<input checked="" type="checkbox"/>	<input type="checkbox"/>
V	Stiff, Gregory M.	18167 US Highway 19 North, Suite 450	Clearwater, FL 34624-6572	<input type="checkbox"/>	<input checked="" type="checkbox"/>
V	Hallstrom, John D.	18167 US Highway 19 North, Suite 450	Clearwater, FL 34624-6572	<input type="checkbox"/>	<input checked="" type="checkbox"/>
P	Nixon, Michael	18167 US Highway 19 North, Suite 450	Clearwater, FL 34624-6572	<input type="checkbox"/>	<input checked="" type="checkbox"/>

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Brian R. Keller

January 9, 1997 813/524-1400

Date

Daytime Phone #

CR2E034 (9/96)