

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000000502

1. Entity Name
KEEN, INC.

FILED
Mar 09, 2001 8:00 am
Secretary of State

03-09-2001 90497 012 ***150.00

0057375

Principal Place of Business
1031 W MORESE BLVD
SUITE 325
WINTER PARK FL 32789

Mailing Address
1031 W MORESE BLVD
SUITE 325
WINTER PARK FL 32789

00023740



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-3488638

Applied For
Not Applicable

Zip

Country

Zip

Country

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

Name
Ralph V. Hadley, III, Esquire

Street Address (P.O. Box Number is Not Acceptable)
1031 W. Morse Blvd., Ste 160

City Winter Park FL Zip Code 32789

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 1/26/01

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 NAME ☐ Delete
PD KEEN, ALLAN E
STREET ADDRESS 1031 W MORESE BLVD STE 325
CITY-ST-ZIP WINTER PARK FL 32789

TITLE NAME ☒ Change ☐ Addition
Keen, Allan E.
STREET ADDRESS 1031 W. Morse Blvd. Ste 325
CITY-ST-ZIP Winter Park, FL 32789 D/C/T/S

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

TITLE NAME ☐ Change ☒ Addition
Jay E. Folk
STREET ADDRESS 1031 W. Morse Blvd. Suite 325
CITY-ST-ZIP Winter Park, FL 32789 P

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

TITLE NAME ☐ Change ☒ Addition
Cheryl M. Kirst
STREET ADDRESS 1031 W. Morse Blvd. Ste 325
CITY-ST-ZIP Winter Park, FL 32789 VP

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

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

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

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

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

TITLE NAME ☐ 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.

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE 1/29/01 (407) 6454400
Daytime Phone #

CR2E034 (10/00)