

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P98000036957

1. Entity Name
K M K REALTY CORP.



Principal Place of Business
**10276 RIVERSIDE DRIVE
PALM BEACH GARDENS, FL 33410**

Mailing Address
**10276 RIVERSIDE DRIVE
PALM BEACH GARDENS, FL 33410**

DO NOT WRITE IN THIS SPACE



04072006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0862819

Applied For:
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**KEATING, KEITH M
10276 RIVERSIDE DRIVE
PALM BEACH GARDENS, FL 33410**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and agree to the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **D**
NAME **KEATING, KEITH M**
STREET ADDRESS **10276 RIVERSIDE DRIVE**
CITY-ST-ZIP **PALM BEACH GARDENS, FL 33410**

TITLE **VP**
NAME **MOORE, TIMOTHY J**
STREET ADDRESS **6169 EAGLES NEST DR.**
CITY-ST-ZIP **JUPITER, FL 33458**

TITLE **S**
NAME **KEATING, JOSEPH M**
STREET ADDRESS **10276 RIVERSIDE DRIVE**
CITY-ST-ZIP **PALM BEACH GARDENS, FL 33410**

TITLE
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CITY-ST-ZIP

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CITY-ST-ZIP

U00000518003
05/01/06-80071-014 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Santhya Moore *Timothy J. Moore*

4/7/06

5617755882

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Deputy's Phone #