2006 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P98000096457

1. Entity Name

KEENAN DEVELOPMENT GROUP, INC.



Principal Place of Business

Mailing Address

1900 W COMMERCIAL BLVD, SUITE 200 FORT LAUDERDALE, FL 33309-3018

1900 W COMMERCIAL BLVD, SUITE 200 FORT LAUDERDALE, FL 33309-3018

FILED Apr 24, 2006 8:00 am Secretary of State

04-24-2006 90352 049 ***150.00

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No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0892969 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BOYLE, CONRAD J 500 EAST BROWARD BLVD. SUITE 1950 FORT LAUDERDALE, FL 33394

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FORT LAUDERDALE, FL 33394			INTHIS SPACE			
	named entity submits this statement for the plions of registered agent.	ourpose of changing its registered of	fice or i	egistered agent, or bo	oth, in the State of Florida. I am far	miliar with, and accept
SIGNATURE	Signsture, typed or printed name of registered agent and title	if applicable. (NOTE: Registered Ager	it signaturi	a required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees		
10. TITLE NAME STREET ADDRESS	D CHYNOWETH, DALE 1900 W COMMERCIAL BLVD, STE 20					
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	FORT LAUDERDALE, FL 33309 D KEENAN, WILLIAM 1900 W COMMERCIAL BLVD, STE 20 FORT LAUDERDALE, FL 33309	00				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HOGUE, CHANTAL 1900 W COMMERCIAL BLVD STE 20 FORT LAUDERDALE, FL 33309	0		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			5	IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS						- :

12. Thereby certify that the information supplied with this filling 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

HATURE AND TYPED OF THIS OF STANKING OFFICER OR DIRECTOR 42 U.P.

Gpr 4/06

Daytime Phone #