

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State
 05-03-2001 90085 027 ***150.00

0479872

DOCUMENT # S77858

Entity Name
KENO ENTERPRISES, INC.

Principal Place of Business

**714 MONTCLAIR ROAD
 LEESBURG FL 34748
 US**

Mailing Address

**P.O. BOX 983
 ZELLWOOD FL 32798
 US**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3085653**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**SPENCER, JOHN R
 1488 HERMIT SMITH RD
 APOPKA FL 32712**

7. Name and Address of New Registered Agent

Name

Spencer, John R

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

714 Montclair Rd.

City

Leesburg

FL

Zip Code

34748

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 **J.R. Spencer** **J.R. Spencer-President**

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

(NOTE: Registered Agent signature required when reinstating)

4-26-01

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

TITLE **DP** ☐ Delete
 NAME **SPENCER, JOHN R**
 STREET ADDRESS **1488 HERMIT SMITH RD.**
 CITY-ST-ZIP **APOPKA FL 32712**

TITLE **S** ☐ Delete
 NAME **SPENCER, R R**
 STREET ADDRESS **1488 HERMIT SMITH RD**
 CITY-ST-ZIP **APOPKA FL 32712**

TITLE **T** ☐ Delete
 NAME **SPENCER, SHIRLEY**
 STREET ADDRESS **1721 HERMIT SMITH RD.**
 CITY-ST-ZIP **APOPKA FL 32712**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
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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.

SIGNATURE: **Regina Spencer** **Regina Spencer - secretary** **4-26-01** **(352) 228-4679**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)