

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000082258

**Entity Name:** JOHN R KEELER, PA

**Current Principal Place of Business:**

1445 W. STATE RD 434  
STE 200  
LONGWOOD, FL 32750

**Current Mailing Address:**

PO BOX 950891  
LAKE MARY, FL 32795

**FEI Number:** 45-3306431

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SMOTHERS LAW FIRM PA  
175 EAST MAIN STREET, STE 11  
APOPKA, FL 32703 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name KEELER, JOHN R  
Address PO BOX 950891  
City-State-Zip: LAKE MARY FL 32795

Title SECRETARY  
Name TRON, NANCY  
Address 5224 WEST SR 46 STE 210  
City-State-Zip: SANFORD FL 32771

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** JOHN KEELER

**PRES**

**08/22/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date