

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000072817

**Entity Name:** JENNIFER L. KEENAN, P.A.

**Current Principal Place of Business:**

2635 EDMUND DR  
GULF BREEZE, FL 32563

**Current Mailing Address:**

2635 EDMUND DR  
GULF BREEZE, FL 32563

**FEI Number:** 46-0960418

**Certificate of Status Desired:** No

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

KEENAN, SHAWN P  
2635 EDMUND DR  
GULF BREEZE, FL 32563 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            PRESIDENT, DIRECTOR  
Name            KEENAN, JENNIFER L  
Address        2635 EDMUND DR  
City-State-Zip: GULF BREEZE FL 32563

Title            TREASURER, SECRETARY,  
                    DIRECTOR  
Name            KEENAN, SHAWN P  
Address        2635 EDMUND DR  
City-State-Zip: GULF BREEZE FL 32563

*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:** SHAWN P KEENAN

**TREASURER**

**01/03/2023**

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

\_\_\_\_\_  
Date