

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000008843

**Entity Name:** KEENE PLUMBING, L.L.C.

**Current Principal Place of Business:**

908 W. MAHONEY STREET  
PLANT CITY, FL 33563

**Current Mailing Address:**

908 W. MAHONEY STREET  
PLANT CITY, FL 33563 US

**FEI Number:** 20-0491911

**Certificate of Status Desired:** Yes

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

KEENE, MARLON L  
908 W. MAHONEY STREET  
PLANT CITY, FL 33563 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

**Authorized Person(s) Detail :**

Title MGRM  
Name KEENE, SALLY W  
Address 908 W. MAHONEY STREET  
City-State-Zip: PLANT CITY FL 33563

Title MGRM  
Name KEENE, MARLON L  
Address 4851 KNIGHTS LOOP  
City-State-Zip: PLANT CITY FL 33565

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MARLON L KEENE

**MANAGER/OWNER**

**02/19/2025**

Electronic Signature of Signing Authorized Person(s) Detail

Date